



DISCLOSURES FOR STATE-SPECIFIC EDUCATIONAL REQUIREMENTS FOR LICENSURE OR CREDENTIALING

The purpose of this form is to assist institutions and programs in determining compliance with standard V.H.4. of the [Accreditation Manual](#).¹

NAME OF INSTITUTION: Southwest University at El Paso

ABHES ID: I-211

ADDRESS: 1414 Geronimo Dr.

CITY: El Paso **STATE:** TX **ZIP:** 79925

WEBSITE ADDRESS: <https://southwestuniversity.edu/>

The following screening questions are provided to determine how standard V.H.4. applies to an ABHES program(s):

Screening Question #1:

Does the institution offer any program designed to meet educational requirements for specific licensure or credentialing required for employment in the field in the state(s) where enrolled students are *physically located**?

Yes No

- If YES, then complete this form in its entirety for applicable program(s).
- If NO, proceed to Screening Question #2.

Screening Question #2:

Does the institution offer any program that it advertises is designed to meet educational requirements for specific licensure or credentialing?

- If YES, then complete this form in its entirety for applicable program(s).

¹ This disclosure is also required under 34 Code of Federal Regulations § [668.43\(a\)\(5\)\(v\)](#) and § [668.43\(c\)](#).

*Notes: **Physically located** references the state where students indicate they are located at the time of application or enrollment and upon receipt of information from students that their location has changed.*

*The ABHES definition of **direct notice** is notification provided to an individual on a one-on-one basis through an appropriate mailing or publication, including direct mailing through the U.S. Postal Service, campus mail, or electronic mail. Posting on a website alone is not sufficient direct notice.*

- If NO to both screening questions, then the institution must check this box and state in its Self-Evaluation Report (SER) or other applicable ABHES correspondence that “standard, V.H.4. does not apply to the program(s) offered at this time.”

PART A

This section must be completed for any institution that answered “Yes” to either of the above screening questions for program(s) designed or advertised to meet educational requirements for specific licensure or credentialing.

| Program Name | Method(s) of Delivery* (Residential; Blended; and/or Full Distance Education, as applicable) | Credential Awarded (Diploma, Certificate, or Type of Degree) | Name of License or Credential Required for Employment in field** | Name of License or Credential Advertised *** |
|---------------------|---|---|--|--|
| Nursing | Residential; Blended | Associate of Applied Science | NCLEX-RN | NCLEX-RN |
| Surgical Technology | Residential; Blended | Associate of Applied Science | CST/TS-C | TS-C |
| | | | | |

***Method of Delivery:** Identify the delivery method(s) utilized in each program per the most recent ABHES approval letter or as reflected in the initial accreditation application.

****Name of License or Credential:** Identify the name of the license or credential required per state law for program graduates to obtain employment in the field (e.g., passing the NCLEX examination is required in most states for graduates of a nursing program to obtain licensure to work in the field).

*****Name of the License or Credential Advertised:** For program(s) advertised by the institution to meet educational requirements for specific licensure or credentialing, identify the name of the license or credential in the designated column. For example, an institution may advertise that graduates of its occupational therapy assistant program may be eligible to sit for the Certified Occupational Therapy Assistant (COTA) credential. If this credential is not mandated by state law for graduates to obtain in-field employment, but the institution advertises that completion of its occupational therapy assistant program provides eligibility for that credential, then COTA should be identified in the designated column as the name of credential advertised.

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PART B

This section must be completed for any institution that answered “Yes” to either of the above screening questions for program(s) designed or advertised to meet educational requirements for specific licensure or credentialing required for employment in the field.

The institution is required to evidence that it provides general disclosures regarding whether completion of a program would be sufficient to meet licensure or credentialing requirements in the state where the student is *physically located** for that occupation by placing each state in one of the following categories:

| Program Name and Credential Awarded | Indicate <i>state(s)</i> * where enrolled students are physically located. | List the <i>state(s)</i> * where the institution determined that program curriculum meets the state educational requirements for a license or credential COLUMN A - V.H.4.(i)a | List the <i>state(s)</i> * where the institution determined that program curriculum does not meet the state educational requirements for a license or credential COLUMN B - V.H.4.(i)b | List the <i>state(s)</i> * where the institution has not determined whether its curriculum meets the state educational requirements for a license or credential COLUMN C - V.H.4.(i)c |
|-------------------------------------|--|---|---|--|
| Nursing (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Surgical Technology (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, |

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| | | | | |
|-----------------------------|----|----|-----|--|
| | | | | MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Health Administration (BS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Medical Assisting (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Health Administration (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, |

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| | | | | |
|-------------------------------------|----|----|-----|--|
| | | | | GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| | | | | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Medical Coding and Billing (AAS) | TX | TX | N/A | |
| Medical Laboratory Technology (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |

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|---|----|----|-----|--|
| Ophthalmology Technician (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Medical Assistant/ Laboratory Assistant (Certificate) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Diagnostic Medical Sonography (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, |

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|-----------------------------------|----|----|-----|--|
| | | | | TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Radiological Sciences (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Computed Tomography (Certificate) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Business Management (BS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. |

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| | | | | |
|--|----|----|-----|--|
| | | | | Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Business Management and Accounting Systems (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Computer Information Technology Systems (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Automotive Technology (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, |

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|-------------------------|----|----|-----|--|
| | | | | MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Diesel Technology (AAS) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |
| Welding (Certificate) | TX | TX | N/A | AL, AK, American Samoa, AZ, AR, CA, CO, CT, DE, FL, GA, Guam, HI, ID, IL, IA, KS, KY, LA, ME, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, N. Marianas Island, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, Virgin Islands, WA, WV, WI, WY |

*Per the ABHES Glossary, "State(s)" is defined as the 50 United States of America, including the District of Columbia and the U.S. Territories.

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- 1) **Describe where the institution provides general disclosures regarding whether completion of the program(s) would be sufficient to meet licensure or credentialing requirements where the student is *physically located****.

The institution provides general disclosures regarding whether completion of the programs would be sufficient to meet licensure or credentialing requirements on our institution's website it will be found on the Consumer Information section, Discretion of Programs State Licensure.

<https://southwestuniversity.edu/consumer-information/>

- 2) **Describe how the institution determines where students are *physically located** at the time of admission.**

The institution provides its program listed under the licensure agreement as residential and blended courses in El Paso, Texas. The students are notified in the admission process that the completion of program must be done in the state of Texas. Any further questions regarding this topic refer to the institution's website.

- 3) **For each prospective or enrolled student located in the state(s) identified in **Column B** and **Column C**, describe how the institution provides *direct notice** of the institution's determination whether completion of the applicable program(s) would be sufficient to meet licensure or certification requirements.**

For each prospective or enrolled students will be notified during their school orientation process.

- 4) **Describe how the institution determines if a student's physical location has changed to another state since admission.**

The students must notify the program director upon notice of relocation to another state since time of admission.

- 5) **Describe how the institution or program provides *direct notice** within 14 calendar days to students after a determination that their physical location changed to another state or if the institution has revised their determination of the program's sufficiency.**

The program director will notify in writing within those 14 calendar days concerning the students change of residency.

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ATTESTATION

I certify to the best of my knowledge that the information submitted within this form is current and correct. I understand that it is the institution's responsibility to demonstrate compliance with the ABHES Accreditation Standards as outlined in the *Accreditation Manual* and that the Commission's deliberations and decisions are made on the basis of the written record.

I understand that failure to evidence the information provided herein and attached hereto this form may result in a delay and/or the Commission taking a negative action.

Authorized (Original) Signature: 

Name: [Jeremy Burciaga](#)

Title: Vice President

Date: [Friday, February 4, 2022](#)

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Discretion of Program State Licensure

The Institution adheres to all state regulations and accreditation standards set by ABHES the Institution's national accrediting body. Graduates of the Institution's programs meet education requirements for credentialing in Texas for the specific credentialing opportunities offered through completion of that specific program. This includes:

AAS MA, AAS MLT, AAS MCB, AAS HA, BS HA, CT, AAS DMS, AAS MRI, AAS N, BSN, AAS OPT, AAS BM, BS BM, AAS DT, AAS AT, AAS WMMD, AAS CITS, AAS ST, Welding, AAS BMHSS and BS RS

Educational requirements for credentialing may vary in different states as summarized below.

Graduates of the Associate of Applied Science in Nursing Program meet educational requirements for the following credentials in the state of Texas. It is not determined if additional credentialing is required in the other 49 states:

- NCLEX

Graduates of the Associate of Applied Science in Surgical Technology Program meet educational requirements for the following credentials in the state of Texas. It is not determined if additional credentialing is required in the other 49 states:

- NCCT

Graduates of the Associate in Radiological Sciences Program meet educational requirements for the following credentials in the state of Texas. It is not determined if additional credentialing is required in the other 49 states:

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- ARRT

Graduates of the Associate of Applied Science in Medical Laboratory Technology Program meet educational requirements for the following credentials in the state of Texas. It is not determined if additional credentialing is required in the other 49 states:

- AMT

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