

EXHIBIT A

Licensure Attestation

I, _____ (Name) (“Student Applicant”), understand that as of the date of this attestation, Johnson & Wales University (JWU) has disclosed that it does not meet certification or licensure requirements in _____ (state of student location) for _____ (program name) (“Program”). I attest that, upon completion of my program, I plan on to seek certification or licensure and employment in _____ (state) where JWU does meet certification or licensure requirements as of the date of this attestation for Program.

I understand that other certification or licensure requirements may include background checks, professional examinations, years of work experience, etc. JWU’s determinations do not address such factors. Students who are considering an academic program that may allow them to pursue professional certification or licensure are strongly encouraged to, and should, check the applicable state’s information and contact the appropriate state agency or board to seek additional information before beginning a program.

Certification and licensure information is generally reviewed and updated by JWU in March of each year. Students who plan to pursue certification or licensure should be aware that state certification and licensure requirements are subject to changes. While a program may originally meet the educational requirements for certification or licensure, changes in requirements could impact the program’s ability to meet any new educational requirements. Students should always check with their state agency, board, or other applicable body to confirm certification and licensure requirements.

By signing below, I certify the above information is true and correct.

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| STUDENT APPLICANT SIGNATURE: |
| Student Applicant Name (print): |
| Participant Date of Birth: |
| Student Applicant Phone Number: |
| Student Applicant Email: |
| Date: |

FOR PARENTS/GUARDIANS OF THOSE OF MINORITY AGE (UNDER AGE 18)

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| PARENT/GUARDIAN SIGNATURE: |
| Parent/Guardian Name (print): |
| Parent/Guardian Phone Number: |
| Parent/Guardian Email: |
| Date: |