Department of Commerce & Insurance

Tennessee State Board of Accountancy

2026 TENNESSEE STATE SPECIFIC ETHICS COURSE SPONSOR/PROVIDER APPLICATION

The Tennessee State Board of Accountancy (TNSBA) has an agreement with the Tennessee Society of CPAs (TSCPA) to develop and deliver the content/material for the Tennessee State Specific Ethics Course as required by rule 0020-05-.03(b). TNSBA requires all sponsors/providers of the Tennessee State Specific Ethics Course to be pre-approved by TNSBA prior to instructing the course. Sponsors will be required to demonstrate their compliance with certain requirements prior to approval. Sponsors not pre-approved annually by Board staff will not be recognized by the Board as an acceptable Tennessee Specific Ethics Course provider. Licensees will not be granted CPE credit for completing a Tennessee Specific Ethics Course from a non-approved sponsor/provider. Please complete and return this form by email to accountancy.forms@tn.gov, fax to (615) 532-8800, or by mail to 500 James Robertson Parkway, Nashville, TN 37243.

Organization Name_____

Contact Name_____ **Website**_____

How should the Board contact you?		**How should the public contact you?**	
Phone		**Phone**	
Email		**Email**	

Instructors	
Name	**License #**

Indicate the delivery method:

☐ Group Internet Based ☐ Group Live ☐ On-demand Instructor Led (NASBA Self-study)

Please acknowledge each of the following requirements by checking the boxes below:

☐ I certify that all the instructors hold a valid Tennessee CPA license in good standing.

☐ I certify that the Tennessee Specific Ethics Course will be instructor-led.

☐ I certify that all course content/material will be obtained from the TSCPA.

☐ I understand that I must be pre-approved annually by Board staff as a provider of this course.

If approved, I will be listed on the Board's website as an approved provider.

☐ I certify that I will submit all course comments and evaluations to the Board within 60 days of receipt.

☐ I will not provide the annual ethics course after March 31 for the previous calendar year

AGREEMENT

By signing below, I agree to all of the above acknowledgements and I understand the course content/material must be obtained from the TSCPA prior to providing the Tennessee Specific Ethics Course to licensees. I also understand if the course content/material is not obtained from TSCPA, my sponsorship will not be valid and I will be removed as an approved provider on the TNSBA's website.

_____

Print Name Signature Date