OMB Control No. 2900-0932 Respondent Burden: 8 Hours Expiration Date: 4/30/2024

| | | | | Expiration Date: 4/30/2024 |
|--|-------------------------------|--------------------------------------|------------------|--|
| Department of Veterans Affairs APPLICATION FOR APPROVAL OF AN INSTITUTION OF HIGHER LEARNING FACILITY | | | | |
| | PART I: GENERAL | INFORMATION | | |
| 1. TELL US WHY YOU ARE SUBMITTING THIS APPLICATION | | | | |
| ☐ INITIAL APPLICATION. This is a request for an initial appr | oval to be designated a | as an institution with programs elig | jible for partic | ipation in VA GI Bill® benefit programs. |
| APPROVAL UPDATES. This is a request for approval or o | ne or more additional p | orogram(s) based on an addendun | n published fo | r a currently approved catalog. |
| 2. NAME OF INSTITUTION | | | 3. VA FAC | ILITY CODE (If known) |
| 4. PHYSICAL ADDRESS | 4. PHYSICAL ADDRESS (If same, | | leave blank) | |
| 6. INSTITUTION WEBSITE ADDRESS | | | | |
| 7. EXTENSIONS: PLEASE LIST OTHER PREVIOUSLY APPROVE EACH OFF-CAMPUS LOCATION. | ED OFF-CAMPUS LOC | ATIONS, INCLUDING COMPLET | E MAILING A | DDRESS AND FACILITY CODES FOR |
| 7A. EXTENSION CAMPUS NAME | 71 | B. COMPLETE ADDRESS | | 7C. VA FACILITY CODE (If known) |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 8. IF MORE THAN FOUR EXTENSIONS, PLEASE ATTACH A COI ADDING AN OFF-CAMPUS LOCATION, PLEASE INDICATE ANY | | | YOUR APPLI | CATION. IF WITHDRAWING OR |
| 9A. THE INSTITUTION IS CLASSIFIED AS: | | | | |
| | TE-NONPROFIT | IO OA MONTU DEDIODO | | |
| 9B. HAS THE FACILITY EXPERIENCED A CHANGE-OF-OWNER: | SHIP IN THE PREVIOU | JS 24-MONTH PERIOD? | | |
| (If "Yes," provide details below. Include relevant dates and det | tails on the impact the. | se changes had on the facility.) | | |
| | | | | |
| 10. DOES THE STATE'S GOVERNING AUTHORITY, WITH OVER FACILITY AS AN INSTITUTION OF HIGHER LEARNING? (i.e., as the conferring of a degree at the associate level or higher.) | a college, university, | | | |
| YES NO (If "No," please do not proceed filling out th | | ODEDATEO (M | <u> </u> | 4 1 |
| 11. WHAT IS THE STATE GOVERNING BODY THAT AUTHORIZE facility is exempt.) | S YOUR FACILITY TO | J OPERATE? (If you are exempt | from state au | thorization, please cite the reason your |
| 12. THE INSTITUTION IS CLASSIFIED AS: | | | | |

FORM 22-10287 Page 1

13. IF APPLICABLE, PROVIDE NAME(S) OF INSTITUTIONAL ACCREDITING AGENCIES <u>RECOGNIZED BY THE U.S. DEPARTMENT OF EDUCATION</u>.

ACCREDITED NONACCREDITED

| | PART I: GENERAL | . INFORMATION (Continued) | |
|---------------------|--|--|--|
| | HAT TYPE OF INSTRUCTIONAL MODALITIES ARE YOU REQUESTING AF cilities. The State Approving Agency will make a determination of what typ | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 11 0 |
| | RESIDENT TRAINING. Face-to-face interaction of instructor and student in toprogram | the same physical location during regularly scheduled times through | ghout the term or school |
| | NON-RESIDENT TRAINING - DISTANCE LEARNING. Interaction between communications technology instead of regularly scheduled class sessions. | the student and instructor (who is physically separated from the st | cudent) through use of |
| | INDEPENDENT STUDY. Consists of a prescribed program of study with provision for interaction between the student and regularly employed faculty of the institution of higher learning. The interaction may be personally or through use of communications technology, including mail, telephone, videoconferencing, computer technology (to include electronic mail), and other electronic means. It is offered without any regularly scheduled, conventional classroom or laboratory sessions and is not considered a cooperative course, farm cooperative course, or correspondence course. | | |
| | SUPERVISED PRACTICAL TRAINING. Academic training that includes intecompletion. The student must remain enrolled in the school during these cou | | required for program |
| | COOPERATIVE COURSE. A full-time program of education which consists establishment with the training in the business or industrial establishment be | | ess or industrial |
| | FARM COOPERATIVE COURSE. A program of education consisting of insti agricultural employment which is relevant to such institutional course and pro- | | concurrently engaged in |
| | CONTRACTED COURSE. All or part of the program of education of a schoo providing the training must obtain approval of the course from the State Appr approved for VA education benefits. | | |
| | REMEDIAL/DEFICIENCY TRAINING . Any secondary level course or subject postsecondary program of education. (NOTE: Remedial/Deficiency Training) | | red for pursuit of a |
| | DEGREE PROGRAM(S) WITH FLIGHT TRAINING. Flight training is provide approved vocational flight school. | ed either in-house by the IHL or provided under contract with a Sta | te Approving Agency |
| | COMBINATION CORRESPONDENCE-RESIDENCE COURSE. A program approved for this modality, please contact the State Approving Agency for an | | |
| | OTHER. (Specify) | | |
| | W OF PROGRAMS - YOU MUST ALSO SUBMIT THE LIST OF PROGRAM: CY FOR WHICH YOU ARE REQUESTING APPROVAL. | S FOR APPROVAL ON A SEPARATE FORM PROVIDED BY TH | E STATE APPROVING |
| | : Medical Residencies do not need to complete Parts II and III. Go directly to | Part IV. | |
| | | ITY CATALOG OR OTHER FACILITY PUBLICATIONS | |
| NOTE | : If the facility only uses brochures and not a formal catalog, the State Approv | | ocess All information |
| | sted must still be provided in the school's written brochures. | | |
| | | N SHOWN IN THE FACILITY'S CATALOG/PUBLICATIONS. | |
| ALL F | ACILITIES MUST COMPLETE THE BELOW AREAS: | ASD DUDI IOATION IDENTIFYING DATA (TI | 450 INFORMATION |
| | 15A. INFORMATION REQUESTED | 15B. PUBLICATION IDENTIFYING DATA (The document(s) should include volume, number, and date of publication) | 15C. INFORMATION PROVIDED ON PAGE(S) |
| ACIL | TY'S NAME, ADDRESS, AND TELEPHONE NUMBER | | |
| ISTIN | G OF INSTITUTION'S ADMINISTRATORS AND SCHOOL OFFICIALS | | |
| | IDAR OF THE SCHOOL SHOWING HOLIDAYS, BEGINNING AND G DATE OF EACH TERM, AND OTHER IMPORTANT DATES | | |
| NSTIT | UTION'S GRADING SYSTEM | | |
| NSTIT | UTION'S GRADUATION REQUIREMENTS | | |
| CADI | EMIC PROBATION, SUSPENSION, AND REENTRANCE POLICIES | | |
| | UTION MAINTAINS RECORDS OF GRADES AND TRANSCRIPTS UM OF THREE YEARS) | | |
| F APF | LICABLE: INSTITUTION'S ATTENDANCE POLICY | | |
| RAIN DUC F CR | UTION'S POLICY ON GRANTING CREDIT FOR PRIOR EDUCATION AND NG (FACILITY MUST OBTAIN A WRITTEN RECORD OF PRIOR ATION AND TRAINING (INCLUDING MILITARY TRAINING), GRANTING EDIT WHEN APPROPRIATE, AND SHORTENING OF PROGRAM RDINGLY) | | |

| PART II: INFORMATION REGARDING FACILITY CATALOG OR OTHER FACILITY PUBLICATIONS (Continued) | | | | |
|---|---|--------------|--|--|
| ACCREDITED FACILITIES ONLY: U.S. DEPARTMENT OF EDUCATION RECOGNIZED ACCREDITATIONS FOR THE FACILITY | | | | |
| THE FOLLOWING FACILITIES MUST ALSO COMPLETE THE BELOW AREAS: | | | | |
| Accredited public or not-for-profit institutions of higher learning that offer | non-degree certificate or diploma-based programs. | | | |
| Accredited for-profit institutions of higher learning. Non-accredited institutions of higher learning. | | | | |
| ACCREDITED FACILITIES ONLY SEEKING APPROVAL OF DEGREE PROGRAM | S SKIP TO PART V | | | |
| | 1 | | | |
| SCHOOL POLICY ON ADMISSIONS/ENROLLMENT WITH RESPECT TO ENROLLMENT DATES AND SPECIFIC ENTRANCE REQUIREMENTS FOR EACH COURSE | | | | |
| INSTITUTION'S POLICY RELATING TO STUDENT CONDUCT AND CONDITIONS FOR DISMISSAL FOR UNSATISFACTORY CONDUCT | | | | |
| LISTING OF PROGRAM DESCRIPTIONS AND/OR OUTLINES | | | | |
| DESCRIPTIONS OF INDIVIDUAL COURSES OR SUBJECTS REQUIRED FOR EACH PROGRAM. NON-ACCREDITED FACILITIES MUSTITEMIZE: SUBJECTS OR UNITS IN THE COURSE, TYPE OF WORK, OR SKILL TO BE LEARNED, AND APPROXIMATE TIME AND CLOCK HOURS TO BE SPENT ON EACH SUBJECT OR UNIT (including breakdown of theory and shop hours) | | | | |
| DESCRIPTION OF AVAILABLE SPACE, FACILITIES, AND EQUIPMENT | | | | |
| EVIDENCE THAT THE EDUCATIONAL AND EXPERIENCE QUALIFICATIONS OF DIRECTORS, ADMINISTRATORS, AND INSTRUCTORS TEACHING COURSES FOR WHICH APPROVAL IS SOUGHT, ARE ADEQUATE | | | | |
| EVIDENCE THAT COURSES OR PROGRAMS DESIGNED TO PREPARE AN INDIVIDUAL FOR STATE LICENSURE OR CERTIFICATION MEET ALL LICENSURE OR CERTIFICATION REQUIREMENTS (May be included within the listing or programs submitted for approval) | | | | |
| EVIDENCE THAT COURSES OR PROGRAMS DESIGNED TO PREPARE AN INDIVIDUAL FOR EMPLOYMENT IN AN OCCUPATION THAT REQUIRES STATE APPROVAL, LICENSURE, OR CERTIFICATIONS MEETS SUCH STANDARS (May be included within the listing or programs submitted for approval) | | | | |
| IF APPLICABLE: DESCRIPTIONS OF BASIC SKILLS, REMEDIAL OR DEFICIENCY SUBJECTS, INCLUDING ENGLISH AS A SECOND LANGUAGE | | | | |
| (ESL), HIGH SCHOOL COMPLETION OPTIONS (GED ETC.), AND OTHER SPECIAL OR ALTERNATIVE LEARNING SUBJECTS | | | | |
| NON-ACCREDITED INSTITUTIONS OF HIGHER LEARNING MUST ALSO COMPLETE THE BELOW AREAS: | | | | |
| DETAILED LISTING OF FACILITY'S TUITION, FEES, AND OTHER CHARGES | | | | |
| NAME OF GOVERNING BODY, CORPORATE OWNER, AND BOARD MEMBERS | | | | |
| NAMES AND QUALIFICATIONS OF SCHOOL FACULTY | | | | |
| ATTENDANCE POLICY WHICH INCLUDES: 1. EXCUSED/UNEXCUSED ABSENCES; 2. TARDINESS; 3. EXCESSIVE ABSENCES; 4. MAKE-UP WORK; AND 5. INTERRUPTION FOR UNSATISFACTORY ATTENDANCE | | | | |
| INSTITUTION'S REFUND POLICY (NON-ACCREDITED SCHOOLS MUST HAVE A PRO RATA POLICY NOT TO EXCEED THE TOTAL CHARGES THAT THE NUMBER OF DAYS OR HOURS OF PROGRAM COMPLETED BEARS TO THE TOTAL LENGTH OF THE PROGRAM. THE NON-REFUNDABLE PORTION OF REGISTRATION FEES WILL NOT EXCEED \$10.00) | | | | |

PART II - INFORMATION REGARDING FACILITY CATALOG OR OTHER FACILITY PUBLICATIONS (Continued)

NOTE: Provide an addendum on institution letterhead signed by the Chief Administrative Officer for any information requested above that is not currently listed in the school catalog or other school publication.

REVIEW OF PROGRAMS - YOU MUST ALSO SUBMIT THE LIST OF PROGRAMS FOR APPROVAL ON A SEPARATE FORM PROVIDED BY THE STATE APPROVING AGENCY FOR WHICH YOU ARE REQUESTING APPROVAL

| AGENCY FOR WHICH YOU ARE REQUESTING APPROVAL. | | | | |
|--|--|--|--|--|
| PART III - IHL FACILITIES WITH FLIGHT TRAINING PROGRAMS ONLY | | | | |
| 16. DOES YOUR FACILITY PROVIDE IN-HOUSE FLIGHT TRAINING OR DOES YOUR FACILITY PROVIDE INSTRUCTIONAL FLIGHT TRAINING UNDER CONTRACT WITH A STAND-ALONE VOCATIONAL FLIGHT SCHOOL? (In-house is defined as offering the entire degree program within the school and not contracting out to a separate entity for the flight training portion.) IN-HOUSE FLIGHT TRAINING (Answer Nos. 17 - 21) CONTRACTED FLIGHT TRAINING THROUGH A VOCATIONAL FLIGHT SCHOOL (If contracted, please provide the name of the operator below.) (Answer Nos. 22 and 23) | | | | |
| | | | | |
| NOTE: If your IHL has partnered with or wants to partner with a Flight School for pilcown separate approval from the State Approving Agency. If your school does not off included in the degree program approval. Please do not proceed filling out sections of | er Private Pilot Training in-house as part of the degree program, tl | | | |
| NOTE: If your contracted flight partner is not currently approved by the SAA jurisdict | ion, you cannot seek approval of any degree programs that includ | le flight training. | | |
| 17. IN-HOUSE FLIGHT TRAINING ONLY: DOES THE SCHOOL HIRE ITS OWN FA AND HOLD REQUIRED FEDERAL AVIATION ADMINISTRATION (FAA) CERTI YES NO | | THE ACCREDITING BODY | | |
| 18. IN-HOUSE FLIGHT TRAINING ONLY: SPECIFY WHETHER THE FLIGHT TRA REQUIREMENTS WITHIN THE FEDERAL AVIATION REGULATIONS (FARSs) PART 141 PART 61 COMBINATION OF PAR | RT 141 AND PART 61 | R THE FOLLOWING | | |
| 19. IN-HOUSE FLIGHT TRAINING ONLY: DOES THE SCHOOL HAVE ACCESS TO | O AIRPORT FACILITIES AND EQUIPMENT? | | | |
| not limited to the equipment approved under the vocational f | ust be submitted to the SAA of jurisdiction for approval. Contractin light school approved by the SAA of jurisdiction.) | g for equipment/facilities are | | |
| Air Agency Certificate issued by the FAA under 14 CFR Part 141 includin All Training Course Outlines (TCOs) and Syllabi approved by the FAA for | | urses, or syllabi for Part 61 | | |
| approved courses. | TION SHOWN IN THE FACILITY'S CATALOG/PUBLICATIONS. | | | |
| 21A. INFORMATION REQUESTED | 21B. PUBLICATION IDENTIFYING DATA (If applicable - the document(s) should include volume, number, and date of publication) | 21C. INFORMATION PROVIDED ON PAGE(S) | | |
| EXACT DESCRIPTION OF THE PROGRAM AND OFFERED COURSES | | | | |
| COST OF EACH COURSE SHOWING EVIDENCE OF TYPE OF PAYMENT (HOURLY, FLAT RATE, ETC.) | | | | |
| EXACT NUMBER OF HOURS FROM THE APPROVED SYLLABUS FOR EACH FLIGHT COURSE DESCRIPTION | | | | |
| PRIOR CREDIT POLICY (LIMITED TO 50 PERCENT FOR FLIGHT TRAINING UNDER FAA RULES) | | | | |
| 22A. <u>IHLS CONTRACTING WITH A SAA-APPROVED FLIGHT SCHOOL(S)</u> YOU MUST SUBMIT A COPY OF YOUR CONTRACT WITH THE FLIGHT SCHO | OOL. IT MUST INCLUDE: | | | |
| Courses contracted - only those courses listed on the current Air Agency Equipment contracted 0 only equipment the facility is approved for by the | | 141. | | |
| 22B. NAME OF CONTRACTED VOCATIONAL FLIGHT SCHOOL AND VA FACILIT NAME OF SCHOOL | TY CODE (If known) | | | |
| VA Facility Code (If known) | | | | |
| 23. PLEASE PROVIDE THE FOLLOWING INFORMA | TION SHOWN IN THE FACILITY'S CATALOG/PUBLICATIONS. | | | |
| 23A. INFORMATION REQUESTED | 23B. PUBLICATION IDENTIFYING DATA (If applicable - the document(s) should include volume, number, and date of publication) | 23C. INFORMATION PROVIDED ON PAGE(S) | | |
| THE REQUIRED FLIGHT HOURS FOR EACH COURSE THAT CONTAINS THE FLIGHT TRAINING COMPONENT. HOURS MUST BE BROKEN DOWN WITH ASSOCIATED HOURLY RATES OR A FLAT RATE AND MUST MATCH THE APPROVED SYLLABUS FOR EACH COURSE | | | | |
| LISTING OF AIRCRAFT - ALL AIRCRAFT, LISTING TAIL NUMBER, TYPE, AND HORSEPOWER | | | | |
| LISTING OF FACILITIES - SAME AS APPROVED BY THE SAA OF JURISDICTION | | | | |

| PART III: IHL FACILITIES WITH FLIGHT TRAINING PROGRAMS ONLY (Continued) | | | | | |
|--|--|--|--|--|--|
| 23A. INFORMATION REQUESTED | 23B. PUBLICATION IDENTIFYING DATA (If applicable - the document(s) should include volume, number, and date of publication) | 23C. INFORMATION PROVIDED ON PAGE(S) | | | |
| CLEARLY DEFINED STANDARDS OF PROGRESS, INCOMPLETE POLICY, PRIOR CREDIT POLICY | | | | | |
| NOTE: If more than one location or contractor is used, please attach additional infor your application. Please E-mail the State Approving Agency (SAA) for any additional information of the state of th | | r on a separate page with | | | |
| PART IV: MEDICAL R | RESIDENCY FACILITIES ONLY | | | | |
| Medical residencies (other than residencies in podiatric medicine), dental residencie institutional courses only when an appropriate accrediting agency accredits and app programs must lead to certification by an appropriated Specialty or Subspecialty Box be approved to include a period of practice following completion of the education rec medicine may be approved and recognized as institutional training only when it has | proves them as leading to certification for a recognized professional ard, the American Osteopathic Association, or the American Denta quirements even though the accrediting agency requires the practi | al objective. These residency al Association, and will not ice. A residency in podiatric | | | |
| 24. PLEASE SELECT THE ACCREDITING BOCY OF YOUR PROGRAM(S) BELOV | | | | | |
| ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION (ACCOMMittee) | CGME), (Or if they have delegated accrediting authority, the appro | priate Residency Review | | | |
| AMERICAN OSTEOPATHIC ASSOCIATION (AOA) | | | | | |
| COMMISSION ON DENTAL ACCREDITATION OF THE AMERICAN DENTA | AL ASSOCIATION (CODA) | | | | |
| COUNCIL ON PODIATRY EDUCATION OF THE AMERICAN PODIATRY A | SSOCIATION (CPME) | | | | |
| 25. THE INSTITUTION PROVIDES THE FOLLOWING INSTITUTIONAL TRAINING: | | | | | |
| RESIDENCY FELLOWSHIP OTHER (Please sp | pecify below): | | | | |
| REVIEW OF PROGRAMS - YOU MUST ALSO SUBMIT THE LIST OF RESIDENCY/FELLOWSHIP PROGRAMS FOR APPROVAL ON A SEPARATE FORM PROVIDED BY THE STATE APPROVING AGENCY FOR WHICH YOU ARE REQUESTING APPROVAL. PLEASE PROVIDE ACGME, AOA, CODA, OR CPME PROGRAM REQUIREMENTS FOR EACH PROGRAM BEING REQUESTED. | | | | | |
| PART V: INFORMATION REGARDING OPERATION/ | AL STATUS OF THE FACILITY (ALL MUST BE COMPL | ETED) | | | |
| 26. HAS ANY FEDERAL OR STATE GOVERNMENT ENTITY TAKEN ADVERSE REGULATORY ACTION AGAINST THE FACILITY SUCH AS PLACING THE FACILITY ON A PROVISIONAL CERTIFICATION STATUS OR OTHER PUNITIVE ACTION? YES NO (If "Yes," explain the circumstances that led to the adverse regulatory action below.) | | | | | |
| 27. HAS THE FACILITY BEEN NAMED AS A DEFENDANT IN ANY LITIGATION RE | ELATED TO ITS TRAINING PROGRAMS? | | | | |
| ☐ YES ☐ NO (If "Yes," explain the circumstances and the result of the litigation below.) (If "Yes," explain the circumstances and the result of the litigation below.) | | | | | |
| 28. ACCREDITED FACILITIES ONLY: DOES THE FACILITY PARTICIPATE IN A PROGRAM UNDER TITLE IV WITH THE U.S. DEPARTMENT OF EDUCATION? | | | | | |
| YES NO (If "No," please contact the State Approving Agency to deter | rmine if your facility is eligible for a waiver of this requirement. | .) | | | |
| (If "Yes," please list your OPEID Number: | | | | | |
| 29. ACCREDITED FACILITIES ONLY (excluding medical residency programs): HAS THE FACILITY BEEN SUBJECT TO PROBATION, SUSPENSION, AN ORDER TO SHOW CAUSE RELATING TO THE EDUCATIONAL INSTITUTION'S ACADEMIC POLICIES AND PRACTICES OR TO ITS FINANCIAL STABILITY OR REVOCATION OF ACCREDITATION? | | | | | |
| YES NO (If "Yes," explain the circumstances and the result of the litigation below.) | | | | | |
| 30. NON-ACCREDITED FACILITIES ONLY (excluding medical residency programs): THE FACILITY IS FINANCIALLY SOUND AND CAPABLE OF FULFILLING ITS COMMITMENTS FOR TRAINING. THE FACILITY AGREES TO SUBMIT WITH THIS APPLICATION FINANCIAL DOCUMENTATION TO SUBSTANTIATE FINANCIAL SOUNDNESS. (Examples of documentation may include copies of tax returns, bank statements, or financial reports. New facilities are requested to submit 24 months of financial data to determine financial soundness. Please contact your SAA for additional guidance if needed.) YES NO (If "No," explain the circumstances below.) | | | | | |
| 31. NEW FACILITIES ONLY - PLEASE SUBMIT DOCUMENTATION IDENTIFYING | THE FOLLOWING: | | | | |
| the number of students who have entered and graduated from all prograr if available, the cohort default rate for funds provided to the institution und | ms during the preceding two-year period and; | | | | |

PART VI: FACILITY CERTIFICATION AND ACKNOWLEDGEMENTS

32. ALL FACILITIES - THE INSTITUTION CERTIFIES THE FOLLOWING STATEMENTS:

- The institution complies with all applicable laws and regulations relating to the approval of courses of education.
- During the five-year period preceding the date of this application, the institution has not been subject to, or been party to a contract with any individual or entity that has been subject to:
 - o Any adverse administrative or judicial action that related to the instruction or training, including with respect to the quality of education provided by the institution or establishment; and resulted in a fine or penalty in an amount equal to or more than five percent of the amount of funding provided to the institution or establishment under Title IV of the Higher Education Act of 1965 for the fiscal year preceding the year in which the application is submitted;
 - o Or has not employed an individual or been party to a contract with any individual or entity that has been convicted of a Federal fraud charge related to the instruction or training provided by the institution or establishment.

| Authorizing Official nitial Here | | | | |
|----------------------------------|--|--|--|--|
|----------------------------------|--|--|--|--|

- 33. ALL FACILITIES THE INSTITUTION MUST RETAIN THE RECORDS AND ACCOUNT INFORMATION OF VA STUDENTS FOR THREE YEARS FOLLOWING THE ENDING DATE OF THE LAST PERIOD OF ATTENDANCE CERTIFIED TO VA. THE INSTITUTION MUST MAKE THESE RECORDS AVAILABLE FOR INSPECTION UPON REQUEST FOR THE PURPOSE OF VERIFICATION OF COMPLIANCE WITH THE FOLLOWING PROGRAM REQUIREMENTS:
 - Maintain sufficient records to show the progress of each VA student and to promptly inform VA when the conduct or progress of any VA student is not satisfactory in accordance with the regularly prescribed standards and practices of the institution.
 - Institution will evaluate credit for previous education and training of VA students and shorten the training program appropriately.
 - Institution only admits students meeting admission standards into program. If enrollment agreements are used, are used, they must be completed and signed by each student.
 - Institution will only certify to VA courses that are required for the completion of the student's program.
 - . Institution will charge both VA and Non-VA students the same tuition, fees, and other related miscellaneous amounts for the costs of attendance.
 - Institution can establish the last date of attendance and report to VA within 30 days of the date an eligible VA student formally withdraws from the school or ceases to attend classes.
 - The institution will agree to promptly inform VA when it comes to the school's attention that any VA student:
 - o Has changes in hours of credit or attendance, or
 - o Has interrupted or discontinued a course or program of study, giving the date(s) of withdrawal, and the reason(s), if known, or
 - o Completed/graduated from the program, or
 - o Receives grade(s) for any course(s) that will not be used when computing graduation requirements.

| Authorizing Official | |
|----------------------|--|
| Initial Here | |
| | |

- 34. ALL FACILITIES INSTITUTION UNDERSTANDS THE FOLLOWING IMPORTANT PROGRAM REQUIREMENTS AND/OR LIMITATIONS:
 - Institution will be financially responsible to VA for the payments made directly to the educational institution pursuant to the Post-9/11 GI Bill and the Yellow Ribbon GI Educational Enhancement Program.
 - For students that have provided your facility with a Certificate of Eligibility, including the assessment of late fees, the denial of access to classes, or other institutional facilities, or require that VA students borrow funds due to VA-delayed disbursement of funding.
 - Institution must select an employee to act as a VA contact person (School Certifying Official) and will complete a new VA Form 22-8794, Designation of Certifying Official, whenever an employee is added or removed from this role.
 - Any educational institution that has 100 or more students using VA education benefits during a calendar year must have VA Annual Reporting Fees (ARFs) deposited
 into an account that is separate from the general fund. Institutions with less than 100 students may deposit VA Annual Reporting Fees (ARFs) into either a merged or
 general funds account. Regardless of the number of VA students, the ARF funds must be used to support enrollments or other veteran programs.
 - The institution utilizes the U.S. Department of Education College Financing Plan (Shopping Sheet.)

OR

- Prior to the enrollment of a student, the institution must provide the individual with information regarding the following: graduation rates; if available, job-placement rates for graduates of the course; information regarding the acceptance of institution transfer of credits, including military credits; any conditions or additional requirements, including training, experience, or examinations, required to obtain the license, certification, or approval for which the course of education is designed to provide preparation; and other information to facilitate comparison by the individual of aid packages offered by different educational institutions.
- Accredited Schools Only The facility acknowledges the facility may be suspended or withdrawn from eligibility if the facility is the subject of a negative action, including sanction or probation, made by the institution's accrediting agency.
- Nonaccredited Schools Only Any institution which fails to forward any refund due within 40 days after such a change in status, shall be deemed, prima facie, to have failed to make a prompt refund.

35. ALL FACILITIES - INSTITUTIONS THAT PARTICIPATE IN VA GI BILL PROGRAMS MUST AGREE TO ELECTRONIC FUNDS TRANSFER/DIRECT DEPOSIT TRANSACTIONS FOR THE PAYMENT OF FUNDS RECEIVED ON BEHALF OF THE STUDENT.

| Authorizing Official Initial Here | |
|--------------------------------------|--|
| | |

NOTE: If your school does not charge tuition and you do not wish to receive VA Annual Reporting Fees, you may decline participation in Electronic Funds Transfer.

- 36. NONACCREDITED FACILITIES ONLY THE FOLLOWING ARE REQUIREMENTS FOR PARTICIPATION. SAAS MUST BE ABLE TO VERIFY THE FOLLOWING INFORMATION USING THE SUBMITTED DOCUMENTATION OR OTHER PUBLISHED INFORMATION.
 - The institution complies with all local, city, county, municipal, state, and federal regulations such as fire, building, and sanitation codes.
 - The institution's owners, administrators, and directors are of good reputation and character to provide quality training.
 - Courses taught at this facility are consistent in quality, content, and length with similar courses in public schools and other private schools in the State, with recognized accepted standards.

| _ | |
|--------------------------------------|--|
| Authorizing Official Initial Here | |
| | |

PART VII: SUBMISSION OF MARKETING MATERIALS

REVIEW OF ADVERTISING AND MARKETING - WITH THIS APPLICATION, YOU MUST ALSO SUBMIT ADVERTISING OR RECRUITING MATERIALS YOUR FACILITY USES

- A copy of recruiting or advertising materials you may use. The SAA is required to review any information that advertises GI Bill or veteran's benefits. (Advertising may
 include but is not limited to: Scanned brochures, Internet advertising markups, newspaper inserts, etc.)
 - o Please include information about any third-party contracts or organizations you may use to recruit students.
- Any graduation rates/placement rate data you may publish, with a citation of the source for this data.

The SAA may request additional information or advertising or advertising submissions.

INSTITUTION UNDERSTANDS THE FOLLOWING IMPORTANT REQUIREMENTS AND/OR LIMITATIONS REGARDING ADVERTISING PRACTICES:

- Institution will not engage in advertising and/or enrollment practices of any type, which are erroneous, deceptive, or misleading either by actual statement, omission, or intimation. This includes any of the following practices:
 - Misleading Statements: Communication, action, omission, or intimation made in writing, visually, orally, or through other means, that has the likelihood or tendency to mislead the intended recipient of the communication under the circumstances in which the communication is made. Such terms includes the use of student endorsements or testimonials for an educational institution that a student gives to the institution either under duress or because the institution required the student to make such an endorsement or testimonial to participate in a program of education.
- o **Misrepresentation:** Any false, erroneous, or misleading statement, action, omission, or intimation made directly or indirectly to a student, a prospective student, the public, an accrediting agency, a state agency, or to the Secretary by an eligible institution, one of its representatives, or any person with whom the institution has an agreement to provide education programs, marketing, advertising, recruiting or admissions services.
- Substantial Misrepresentation: Misrepresentation in which the person to whom it was made could reasonably be expected to rely, or has reasonably relied, to
 that person's detriment.
- Limitations on Commissions, Bonuses, and Other Incentive Payments: Any false, erroneous, or misleading statement, action, omission, or intimation made directly or indirectly to a student, a prospective student, the public, an accrediting agency, a state agency, or to the Secretary by an eligible institution, one of its representatives, or any person with whom the institution has an agreement to provide education programs, marketing, advertising, recruiting or admissions services.
- o **Aggressive Enrollment Practices:** Carries out deceptive or persistent enrollment practices, including on military installations, that consist of any automatic renewal of enrollment in courses and programs of education, enrollment in a course or program.
- o Aggressive Recruiting: Carries out deceptive or persistent recruiting practices, including on military installations, that consist of making three or more unsolicited contacts to a covered individual by phone, email, or in-person, during a 1-month period or engaging in same-day recruitment and registration.
- o Lead Generating Activity: Any internal persons or third-party entity receiving any compensation directly or indirectly based upon initiating GI Bill beneficiary interest to secure GI Bill enrollments, course or program completions by a student, or financial aid in an education and training institution with at least one approved GI Bill program.
- The institution does not pay inducements, including any gratuity, favor discount, entertainment, hospitality, loan, transportation, lodging, meals, or other item having monetary value of more than a de minimis amount, to any individual entity or its agents including third-party lead generations or marketing firms other than salaries paid to employees or fees paid to contractors, in conformity with all applicable laws for the purpose of securing enrollments of covered individuals or obtaining access to educational assistance under Title 38, with the exception of scholarships, grants, and tuition reductions provided by the educational institution.
- Institutions are prohibited from using "Gi Bill" in any manner that directly or indirectly implies a relationship affiliation, or endorsement affiliation with the Department of Veterans Affairs.
- Institution agrees to adhere to the VA GI Bill Trademark Terms of Use. If you choose to use the words "GI Bill" in advertising, the trademark symbol "®" should be placed at the upper right corner of the trademarked phrase in the most prominent place at first usage; such as the title of a brochure, form, or the very top of web pages and the following trademark attribution notice must be prominently visible: "GI Bill" is a registered trademark of the U.S. Department of Veterans Affairs (VA)."

 More information can be found at Trademark Terms of Use Education and Training (va.gov).

| moto information out to found at had been and the found of the state o |
|--|
| Authorizing Official Initial Here |
| PART VIII: OTHER INFORMATION SUBMITTED |
| 37. REMARKS (If you need more space, please attach additional remarks to the application.) |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

| PART X: CERTIFICATION AND SIGNATURE OF AUTHORIZING OFFICIAL | | | | |
|--|---------------|---------------------------|--|-------------------------------|
| 39. ADDITIONAL DOCUMENTATION - THE STATE APPROVING AGENCY AND/OR VA MAY REQUIRE ADDITIONAL INFORMATION OR DOCUMENTATION OUTSIDE OF THE INFORMATION REQUESTED ON THIS FORM. ADDITIONAL INFORMATION OR DOCUMENTATION NEEDED TO PROCESS A FACILITY APPROVAL MAY BE REQUIRED TO MEET APPLICABLE STATE OR FEDERAL LAWS. | | | | |
| I CERTIFY THAT all statements in this application are true and correct to the best of my knowledge and belief. | | | | |
| 40A. NAME OF AUTHORIZING OFFICIAL | 40B. SIGNATUR | E OF AUTHORIZING OFFICIAL | | 40C. DATE SIGNED (MM/DD/YYYY) |

PART IX: INSTITUTION CONTACTS

application)

38B. SCHOOL CERTIFYING OFFICIAL EMAIL ADDRESS (Leave blank for original

38A. NAME OF SCHOOL CERTIFYING OFFICIAL (Leave blank for original application)

PRIVACY ACT INFORMATION: VA will not disclose information collected on this form to any sources other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations, Section 1.526 for routine uses (e.g. VA sends education forms or letters with a veteran's identifying information to the veteran's school or training establishment to (1) assist the veteran in the completion of claims forms or (2) for the VA to obtain further information as may be necessary from the school for the VA to properly process the veteran's education claim or to monitor his or her progress during training as identified in the VA System of Records, 58VA21/22/28, Compensation, Pension, Education and Veteran Readiness and Employment Records - VA, published in the Federal Register.

RESPONDENT BURDEN: The respondent population for this form are educational and training institutions that work coordinately with third-party State Approving Agencies. We need this information to determine whether your institution can have programs approved by a State Approving Agency for the purpose of VA Educational Benefits. We estimate that you will need an average of 8 hours to review the instructions, find the information and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain.