SCHEV
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Richmond, Virginia 23219

**State Council of
Higher Education for Virginia**
Advancing Virginia through Higher Education

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INSTITUTIONAL CERTIFICATION APPLICATION FORM

I. General Information (e*ach branch operating in Virginia must certify separately. If operating multiple branches under the same legal name, only one fee will be assessed against that name regardless of the number of branches.)*

Date of Application _____

Institution
Name _____

Virginia Street Address _____ City _____ Zip Code _____

School Telephone Number   School Fax Number
( ) _____   ( ) _____

Contact Person _____
                    Name   Title

Virginia Contact Street Address _____ City _____ State ___ Zip Code _____

Telephone number   Fax number
( ) _____   ( ) _____

Internet Address _____

Contact E-mail Address _____

Chief Executive Officer _____
                           Name   Title

II. Institution Type *(based on state of incorporation)*

30 Out-of-State, Public _____   41 In-State, Degree, For Profit _____

31 Out-of-State, Degree, For Profit _____   42 In-State, Degree, Non Profit _____

32 Out-of-State, Degree, Non Profit _____   43 In-State, Career-Technical _____

33 Out-of-State, Career-Technical _____

III. Accreditation Information *Out-of-State Institutions requesting certification must be fully accredited by an organization recognized by the U.S. Department of Education. Unaccredited in-state institutions must submit annually a summary of actions taken towards securing accreditation.* ***Does not apply to in-state, career-technical schools.***

Accredited: Yes _____ Name of accrediting institution _____

Accredited: No _____ Anticipated date of initial
accreditation award _____

IV. Ownership Information

Legal name (*corporate or other*) of Institution owner _____

Legal Address (*corporate or other*) of owners _____

Telephone number   Fax number
( ) _____   ( ) _____

Ownership Contact Person _____

Telephone number   E-mail Address
( ) _____   _____

Date institution was chartered or authorized to transact business in Virginia, if applicable. *(attach a copy of most current Virginia State Corporation Commission approval notification)*   _____

Date Out-of-State institution was granted authorization to operate from state where main campus is located *(attach a copy of the state authorization document)*   _____

V. Fees – (*A company check, certified bank check or money order, in the correct, non-refundable amount, made payable to the Treasurer of Virginia, must accompany this application. Indicate which dollar amount your institution is submitting.*)

In-State Unaccredited Institutions	$6,000.00 ☐	Renewal Vocational School (annual gross tuition >$150,000)	$2,500.00 ☐
Out-of-State Institutions	$2,500.00 ☐	Renewal Vocational School (annual gross tuition <$150,000)	$1,500.00 ☐
In-State Accredited Institutions/ New Vocational Schools	$2,500.00 ☐	Religious Exemption/Agent Permit	$300.00 ☐

VI Surety – A*ttach the original transacted surety bond form or clean irrevocable line of credit. The surety is based on the non-Title IV funds, which have been received from students or agencies for which the education has not yet been delivered. Institutions certified to operate in Virginia for two calendar years or more shall be exempt from the surety instrument requirement if they can demonstrate a U.S. Department of Education composite financial responsibility score of 1.5 or greater on their current financial statement; or if they can demonstrate a composite score between 1.0 and 1.4 on their current financial statement and have scored at least 1.5 in either of the prior two years. Out-of-state, public institution of higher learning are exempt from the surety requirement.*

VII: Enrollment Data and Other Statistical Reporting

A. New Postsecondary Schools Enrollment Data

Estimated Annual Enrollment _____

Number of Students Per Program: _____
(Please attach separate sheet for multiple programs)

B. Renewal Enrollment Data for ALL Postsecondary Schools
Please see form entitled Enrollment Data Worksheet. Include Fall 2005 headcount of students enrolled who claim a Virginia residence or address only.

C. Renewal Graduation Data for ALL Postsecondary Schools
Please attach a separate sheet listing total number of degrees, certificates, or diplomas conferred per program since last certification.

D. Renewal Placement Data for Unaccredited Institutions of Higher Education and Career-Technical Schools ONLY

Please attach a separate sheet listing all graduates since last certification who have reported employment in their field of study within six months of graduation and within 1 year of graduation. Please include student name and their place of employment obtained through school efforts.