

**APPLICATION FOR AN INAUGURAL AUTHORIZATION TO OPERATE A PRIVATE POSTSECONDARY CAREER SCHOOL IN NEBRASKA # 1 FORM -- 4 PROGRAMS OR LESS**

Name of School:			Administrative Director of School:
School Address including Street, City, State, Zip:			Home Address of Administrative Director, including Zip:
Mailing Address of School including Zip:			Enclosed are completed Administrative Director and Instructor Qualification Forms.
Telephone:	E-Mail Address:	Web Site:	Attached is a statement verifying that none of the following persons have any felony convictions: (1) any persons having twenty-five (25) percent or more ownership of the applicant school (2) resident director (3) administrative staff members.

The ownership of this school is sole proprietorship. The name and home address of the proprietor are listed below.  
 The ownership of this school is partnership. The names and titles of all partners with their respective home addresses are listed below.  
 The ownership of this school is a corporation. The name and address of the corporation, and the names and titles of corporate officers with their respective home addresses are listed below. FISCAL YEAR END DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Proprietor, Partnership, or Corporation:	Home Address of Proprietor/Partner or of Corporation, including Zip Code:
Name and Title:	Home Address:
Name and Title:	Home Address:

Enclosed are the names, addresses, and current status of all schools of which the applicant has previously owned any interest in, and currently owns any interest in, and a declaration as to whether any of these schools were ever denied accreditation, licensing, or authorization to operate from any governmental body or accrediting agency.

Enclosed are copies of the owners' financial statements (balance sheet & income statement) and the most recent federal and state income tax returns. Enclosed is a surety bond or other agreement acceptable to the Department (\$20,000) and the non-refundable statutory fee of \$360.00 plus \$135.00 per program made payable to the Nebraska Department of Education.

Program Title	Student/Teacher Ratio	Days of Attendance							Program Objective		Mode of Delivery		Maximum Enrollment Size	Program Length				Program Measurement		Tuition Charge Per Quarter/Semester	Total Tuition Charge Per Program
		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Certificate	Diploma	Resident	Home Study		Days	Weeks	Months	Years	Clock Hours	Credit Hours		
<b>Listed below are the programs which will be offered.</b> (Enclosed for each program listed, is a course outline, a course description, and a class schedule showing dates and hours of attendance, <b>not given in the catalog.</b> Attached is a list of major items/tools/ equipment available or which will be made available. (Included is information relative to year, make, and model.)																					

**Copies of the following data are enclosed:** 1) all enrollment agreements or contract forms to be used with the students; 2) samples of a student transcript and forms which will be used to monitor student attendance, academic progress, conduct, and placement; 3) policy regarding the maintenance of student records as required in Rule 41; 4) sample of the credentials (certificate/diploma) that will be awarded to students at successful completion of the program of study; 5) media advertising and promotional literature and brochures; 6) school catalog containing the information required by Rule 41; 7) floor plan of the school showing classrooms, students' lounge, rest rooms, etc.; 8) evidence of facility ownership or lease for at least one year; 9) inspection reports from local and state regulatory agencies indicating that the premises and conditions under which students will work and study meet sanitation and safety requirements; 10) application, fee, and bond for an agent's permit

Send completed form and supporting documents to Program Director, Private Postsecondary Career Schools and Veterans Education, Nebraska Department of Education, P.O. Box 94987, Lincoln, NE 68509-4987.  <b>This form should not be reworded.</b>	If the applicant school is owned by an individual, this application should be signed by the owner. If owned by a partnership, it should be signed by the managing partner. If owned by a corporation or association, by one of the authorized officers.
	I have read this application, and the statements therein made are true to the best of my knowledge, information, and belief.
	Signature (Written) <span style="float:right">Signature (Typed/printed)</span>
	Title: