

APPLICATION FOR REVISED PROGRAM APPROVAL

Name of School:

Program Title	Program Objective Credential Awarded: Certificate, Diploma, Associate degree	Program Length Number of Days, Weeks; Months; Years	Program Measurement NCD-No. of Clock Hours IHL-No. of Credit Hours	Total Tuition Per Program/Term	Enrollment Limitation (NCD)	Effective Date of Program
Before Revision						
After Revision						
Program Title	Program Objective Credential Awarded: Certificate, Diploma, Associate degree	Program Length Number of Days, Weeks; Months; Years	Program Measurement NCD-No. of Clock Hours IHL-No. of Credit Hours	Total Tuition Per Program/Term	Enrollment Limitation (NCD)	Effective Date of Program
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Before Revision						
After Revision						

Enclosed is a copy of the Course Description, Course Outline, and other supporting documents indicating that curriculum is based on the knowledge and skill required to enable a graduate to secure an entry level position in this occupation (Rule 41,004.01C). i.e., statements from program Advisory Council members or from local employers approving this curriculum, comparable programs that have been approved and are successful at other schools.
 Catalog or catalog addendum/s containing references to each program.
 The \$40.00 fee per revision is attached, if applicable.
 We do have programs approved for Veterans Education Benefits. Enclosed are three (3) additional copies of the Course Description, Course Outline, and other supporting documents, per course revision requested.

Form should not be reworded. Send to Program Director, Private Postsecondary Career Schools and Veterans Education, Nebraska Department of Education, P.O. Box 94987, Lincoln, NE 68509-4987.

Signature of School Official and Date