OMB Control No. 2900-0932
Respondent Burden: 8 Hours
Expiration Date: 4/30/2027

Department of Veterans Affairs

APPLICATION FOR APPROVAL 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 approval to be designated as an institution with programs eligible for participation in VA GI Bill® benefit programs.

☐ **RE-APPROVAL.** This is a request for a full re-approval of currently approved GI Bill programs and may include a request for approval of one or more additional program(s).

☐ **APPROVAL UPDATES.** This is a request for approval of one or more additional program(s) based on an addendum published for a currently approved catalog.

2. NAME OF INSTITUTION	3. VA FACILITY CODE *(If known)*

4. PHYSICAL ADDRESS	5. MAILING ADDRESS *(If same, leave blank)*

6. INSTITUTION WEBSITE ADDRESS

7. EXTENSIONS: PLEASE LIST EXTENSION CAMPUSES FOR WHICH YOU ARE SEEKING APPROVAL, INCLUDING THE CAMPUS NAME AND COMPLETE MAILING ADDRESS.

7A. EXTENSION CAMPUS NAME	7B. COMPLETE ADDRESS

8. EXTENSIONS: PLEASE LIST OTHER PREVIOUSLY APPROVED OFF-CAMPUS LOCATIONS, INCLUDING COMPLETE MAILING ADDRESS AND FACILITY CODES FOR EACH OFF-CAMPUS LOCATION.

8A. EXTENSION CAMPUS NAME	8B. COMPLETE ADDRESS	8C. VA FACILITY CODE *(If known)*

9. IF MORE THAN FOUR EXTENSIONS, PLEASE ATTACH A COPY OF THE COMPLETE LIST OF EXTENSIONS WITH YOUR APPLICATION.

9A. IF WITHDRAWING OR ADDING AN OFF-CAMPUS LOCATION, PLEASE INDICATE ANY CHANGES IN THE REMARKS SECTION ON THE LAST PAGE

9B. THE INSTITUTION IS CLASSIFIED AS:

☐ PUBLIC ☐ PRIVATE-FOR-PROFIT ☐ PRIVATE-NONPROFIT

9C. HAS THE FACILITY EXPERIENCED A CHANGE-OF-OWNERSHIP IN THE PREVIOUS 24-MONTH PERIOD?

☐ YES ☐ NO

(If "Yes," provide details below. Include relevant dates and details on the impact these changes had on the facility.)

10. DOES THE STATE'S GOVERNING AUTHORITY, WITH OVERSIGHT OVER YOUR EDUCATION INSTITUTIONS AND PROGRAMS, OFFICIALLY CLASSIFY THE FACILITY AS AN INSTITUTION OF HIGHER LEARNING? *(i.e., as a college, university, or similar establishment offering postsecondary level academic instruction leading to the conferring of a degree at the associated level or higher, or as a residency/fellowship placement site.)*

☐ YES ☐ NO *(If "No," please do not proceed filling out this form.)*

11. WHAT IS THE STATE GOVERNING BODY THAT AUTHORIZES YOUR FACILITY TO OPERATE? *(If you are exempt from state authorization, please cite the reason your facility is exempt.)*

12. THE INSTITUTION IS CLASSIFIED AS:

☐ ACCREDITED ☐ NONACCREDITED

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

PART I: GENERAL INFORMATION *(Continued)*

14. WHAT TYPE OF INSTRUCTIONAL MODALITIES ARE YOU REQUESTING APPROVAL? *(You may check more than one box. Not all modalities are approved for all facilities. The State Approving Agency will make a determination of what types of modalities your facilities and courses of study are approved.)*

☐ **RESIDENT TRAINING.** Face-to-face interaction of instructor and student in the same physical location during regularly scheduled times throughout the term or school program

☐ **NON-RESIDENT TRAINING - DISTANCE LEARNING.** Interaction between the student and instructor (who is physically separated from the student) through use of communications technology instead of regularly scheduled class sessions.

☐ **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 internship, practicum, and other occupational based instruction that is required for program completion. The student must remain enrolled in the school during these courses and be under the direction and supervision of the school.

☐ **COOPERATIVE COURSE.** A full-time program of education which consists of institutional courses and alternate phases of training in a business or industrial establishment with the training in the business or industrial establishment being strictly supplemental to the institutional portion.

☐ **FARM COOPERATIVE COURSE.** A program of education consisting of institutional agricultural courses pursued by an eligible person who is concurrently engaged in agricultural employment which is relevant to such institutional course and provides training on a reduced basis.

☐ **CONTRACTED COURSE.** All or part of the program of education of a school may be provided by another school or entity under contract. Such school or entity actually providing the training must obtain approval of the course from the State Approving Agency in the State having jurisdiction of that school or entity before the course is approved for VA education benefits.

☐ **REMEDIAL/DEFICIENCY TRAINING.** Any secondary level course or subject not previously completed satisfactorily which is specifically required for pursuit of a postsecondary program of education. *(NOTE: Remedial/Deficiency Training cannot be certified in a distance learning/online modality.)*

☐ **DEGREE PROGRAM(S) WITH FLIGHT TRAINING.** Flight training is provided either in-house by the IHL or provided under contract with a State Approving Agency approved vocational flight school.

☐ **COMBINATION CORRESPONDENCE-RESIDENCE COURSE.** A program of education may be pursued partly in residence and partly by correspondence. To be approved for this modality, please contact the State Approving Agency for an application to have the correspondence portion of the coursework approved.

☐ **OTHER.** *(Specify)* _____

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.

NOTE: Medical Residencies do not need to complete Parts II and III. Go directly to Part IV.

PART II: INFORMATION REGARDING FACILITY CATALOG OR OTHER FACILITY PUBLICATIONS

NOTE: If the facility only uses brochures and not a formal catalog, the State Approving Agency will treat the brochures as a catalog for this review process. All information requested must still be provided in the school's written brochures.

15. PROVIDE THE FOLLOWING INFORMATION SHOWN IN THE FACILITY'S CATALOG/PUBLICATIONS.

ALL FACILITIES MUST COMPLETE THE BELOW AREAS:

15A. INFORMATION REQUESTED	15B. PUBLICATION IDENTIFYING DATA *(If applicable - The document(s) should include volume, number, and date of publication.)*	15C. INFORMATION PROVIDED ON PAGE(S)
FACILITY'S NAME, ADDRESS, AND TELEPHONE NUMBER		
LISTING OF INSTITUTION'S ADMINISTRATORS AND SCHOOL OFFICIALS		
CALENDAR OF THE SCHOOL SHOWING HOLIDAYS, BEGINNING AND ENDING DATE OF EACH TERM, AND OTHER IMPORTANT DATES		
INSTITUTION'S GRADING SYSTEM		

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

15. PROVIDE THE FOLLOWING INFORMATION SHOWN IN THE FACILITY'S CATALOG/PUBLICATIONS. *(Continued)*

ALL FACILITIES MUST COMPLETE THE BELOW AREAS:

15A. INFORMATION REQUESTED	15B. PUBLICATION IDENTIFYING DATA *(The document(s) should include volume, number, and date of publication)*	15C. INFORMATION PROVIDED ON PAGE(S)
INSTITUTION'S GRADUATION REQUIREMENTS		
ACADEMIC PROBATION, SUSPENSION, AND REENTRANCE POLICIES		
INSTITUTION MAINTAINS RECORDS OF GRADES AND TRANSCRIPTS (MINIMUM OF THREE YEARS)		
IF APPLICABLE: INSTITUTION'S ATTENDANCE POLICY		
INSTITUTION'S POLICY ON GRANTING CREDIT FOR PRIOR EDUCATION AND TRAINING (FACILITY MUST OBTAIN A WRITTEN RECORD OF PRIOR EDUCATION AND TRAINING (INCLUDING MILITARY TRAINING), GRANTING OF CREDIT WHEN APPROPRIATE, AND SHORTENING OF PROGRAM ACCORDINGLY)		
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 PROGRAMS SKIP TO PART V.

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 MUST ITEMIZE:** 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 STANDARDS **(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.		
DETAILED LISTING OF FACILITY'S TUITION, FEES, AND OTHER CHARGES		
NAME OF GOVERNING BODY, CORPORATE OWNER, AND BOARD MEMBERS		

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

NON-ACCREDITED INSTITUTIONS OF HIGHER LEARNING MUST ALSO COMPLETE THE BELOW AREAS:

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)		
SCHOOL POLICY ON ADMISSIONS/ENROLLMENT WITH RESPECT TO ENROLLMENT DATES AND SPECIFIC ENTRANCE REQUIREMENTS FOR EACH COURSE		

NOTE: Provide an addendum on institution letterhead signed by the facility authorizing official 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.

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 pilot training, the Flight School must already have its program(s) approved or must apply for its own separate approval from the State Approving Agency. If your school does not offer Private Pilot Training in-house as part of the degree program, the course may not be included in the degree program approval. Please do not proceed filling out sections of this form, refer to Part III Instructions.

NOTE: If your contracted flight partner is not currently approved by the SAA jurisdiction, you cannot seek approval of any degree programs that include flight training.

17. **IN-HOUSE FLIGHT TRAINING ONLY:** DOES THE SCHOOL HIRE ITS OWN FACULTY FOR FLIGHT TRAINING UNDER THE STANDARDS OF THE ACCREDITING BODY AND HOLD REQUIRED FEDERAL AVIATION ADMINISTRATION (FAA) CERTIFICATIONS FOR EACH COURSE THEY WILL BE TEACHING?

☐ YES ☐ NO

18. **IN-HOUSE FLIGHT TRAINING ONLY:** SPECIFY WHETHER THE FLIGHT TRAINING IN EACH COLLEGE COURSE WILL BE TAUGHT UNDER THE FOLLOWING REQUIREMENTS WITHIN THE FEDERAL AVIATION REGULATIONS (FARSs)

☐ PART 141 ☐ PART 61 ☐ COMBINATION OF PART 141 AND PART 61

19. **IN-HOUSE FLIGHT TRAINING ONLY:** DOES THE SCHOOL HAVE ACCESS TO AIRPORT FACILITIES AND EQUIPMENT?

☐ YES ☐ NO *(If contracting, the contracts used with any other operator must be submitted to the SAA of jurisdiction for approval. Contracting for equipment/facilities are not limited to the equipment approved under the vocational flight school approved by the SAA of jurisdiction.)*

20. **IHL WITH IN-HOUSE FLIGHT TRAINING FACILITIES ONLY**

- Air Agency Certificate issued by the FAA under 14 CFR Part 141 including the FAA Letter of Authorization or WebOPSS
- All Training Course Outlines (TCOs) and Syllabi approved by the FAA for each course you are seeking approval for Part 141 approved courses, or syllabi for Part 61 approved courses.

21. PLEASE PROVIDE THE FOLLOWING INFORMATION 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 FOR PARTS 141 AND 142 FACILITIES.)		

22A. **IHL CONTRACTING WITH AN SAA-APPROVED FLIGHT SCHOOL(S)**

YOU MUST SUBMIT A COPY OF YOUR CONTRACT WITH THE FLIGHT SCHOOL. IT MUST INCLUDE:

- Courses contracted - only those courses listed on the current Air Agency Certificate and issued Letter of Authorization under 14 CFR Part 141.
- Equipment contracted 0 only equipment the facility is approved for by the SAA of jurisdiction may be used.

22B. **NAME OF CONTRACTED VOCATIONAL FLIGHT SCHOOL AND VA FACILITY CODE** *(If known)*

NAME OF SCHOOL _____

VA Facility Code *(If known)* _____

23. PLEASE PROVIDE THE FOLLOWING INFORMATION 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		
CLEARLY DEFINED STANDARDS OF PROGRESS, INCOMPLETE POLICY, PRIOR CREDIT POLICY		

NOTE: If more than one location or contractor is used, please attach additional information requested above on each contracted location or contractor on a separate page with your application. Please E-mail the State Approving Agency (SAA) for any additional questions.

PART IV: MEDICAL RESIDENCY FACILITIES ONLY

Medical residencies (other than residencies in podiatric medicine), dental residencies, and osteopathic internships and residencies may be approved and recognized as institutional courses only when an appropriate accrediting agency accredits and approves them as leading to certification for a recognized professional objective. These residency programs must lead to certification by an appropriated Specialty or Subspecialty Board, the American Osteopathic Association, or the American Dental Association, and will not be approved to include a period of practice following completion of the education requirements even though the accrediting agency requires the practice. A residency in podiatric medicine may be approved and recognized as institutional training only when it has been approved by the Council on Podiatry Education of the American Podiatry Association.

24. PLEASE SELECT THE ACCREDITING BODIES OF YOUR PROGRAM(S) BELOW AND SUBMIT PROOF OF CURRENT ACCREDITATION WITH THIS APPLICATION:

- ☐ ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION (ACGME), *(Or if they have delegated accrediting authority, the appropriate Residency Review Committee)*
- ☐ AMERICAN OSTEOPATHIC ASSOCIATION (AOA)
- ☐ COMMISSION ON DENTAL ACCREDITATION OF THE AMERICAN DENTAL ASSOCIATION (CODA)
- ☐ COUNCIL ON PODIATRY EDUCATION OF THE AMERICAN PODIATRY ASSOCIATION (CPME)

25. THE INSTITUTION PROVIDES THE FOLLOWING INSTITUTIONAL TRAINING:

☐ RESIDENCY ☐ FELLOWSHIP ☐ OTHER *(Please specify 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 OPERATIONAL STATUS OF THE FACILITY *(ALL MUST BE COMPLETED)*

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. IN THE PREVIOUS FIVE-YEAR PERIOD PRECEEDING THE DATE OF THIS APPLICATION, HAS THE FACILITY BEEN NAMED AS A DEFENDANT IN ANY LITIGATION RELATED TO ITS TRAINING PROGRAMS?

☐ YES ☐ NO

(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 determine if your facility is eligible for a waiver of this requirement.)*

(If "Yes," please list your OPEID Number: _____

PART V: INFORMATION REGARDING OPERATIONAL STATUS OF THE FACILITY *(ALL MUST BE COMPLETED) (Continued)*

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, or financial reports that reports the financial position of the institution or establishment, as prepared by any appropriate third-party entity. 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 programs during the preceding two-year period and;
- If available, the cohort default rate for funds provided to the institution under Title IV of the Higher Education Act of 1965.

PART VI: FACILITY CERTIFICATION AND ACKNOWLEDGMENTS

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:
  - 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;
  - 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 Initial 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, 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:
  - Has changes in hours of credit or attendance, or
  - Has interrupted or discontinued a course or program of study, giving the date(s) of withdrawal, and the reason(s), if known, or
  - Completed/graduated from the program, or
  - 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.
- Any individual using Post-GI Bill must be permitted to attend or participate from the period that they submit their "Certificate of Eligibility" demonstrating entitlement until payment is made or 90 days after certification.
- For Post-9/11 GI Bill students that have provided your facility with a Certificate of Eligibility, the educational institution will not impose any penalty 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.

34. **ALL FACILITIES -** INSTITUTION UNDERSTANDS THE FOLLOWING IMPORTANT PROGRAM REQUIREMENTS AND/OR LIMITATIONS *(Continued)*:

- 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 must either:

  (a) Utilize the U.S. Department of Education College Financing Plan (Shopping Sheet), ***OR***

  (b) 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.

Authorizing Official Initial Here

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.)
  - 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.
  - **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.
  - **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.
  - **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.
  - **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.

PART VII: SUBMISSION OF MARKETING MATERIALS *(Continued)*

- 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).

Authorizing Official Initial Here

PART VIII: OTHER INFORMATION SUBMITTED

37. REMARKS *(If you need more space, please attach additional remarks to the application.)*

PART IX: INSTITUTION CONTACTS

38A. NAME OF SCHOOL CERTIFYING OFFICIAL *(Leave blank for original application)*	38B. SCHOOL CERTIFYING OFFICIAL EMAIL ADDRESS *(Leave blank for original 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.

PENALTY - The law provides that whoever makes any statement of a material fact, knowing it to be false, shall be punished by fine or imprisonment or both.

FOR ALL SCHOOLS: I CERTIFY THAT the catalog or bulletin, along with all statements or additional documentation submitted with this application, are certified as true and correct in content and policy to the best of my knowledge and belief.

FOR ALL PUBLIC OR PRIVATE-NONPROFIT SCHOOLS: I CERTIFY THAT the institution may not take any adverse action against a covered member on the basis that such covered member withdraws or takes a leave of absence in accordance with 38 U.S.C. 3691A.

40A. NAME OF AUTHORIZING OFFICIAL	40B. SIGNATURE OF AUTHORIZING OFFICIAL	40C. DATE SIGNED *(MM/DD/YYYY)*

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: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 2900-0932, and it expires April 30, 2027. Public reporting burden for this collection of information is estimated to average 8 hours per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing the burden, to VA Reports Clearance Officer at **VACOPaperworkReduAct@va.gov**. Please refer to OMB Control No. 2900-0932 in any correspondence. Do not send your completed VA Form 22-10287 to this email address.