

UNIVERSAL BRANCHING APPLICATION

For NACCAS Use Only: OWNER I. D. _____ Temporary Ref. # _____
 Date of Approval by Commission: _____
 Last Effective Date (Due Date of Owner’s Next Financial Statements): _____

You must submit eight (8) copies of this application with its attachments and application fee. Please note that all sections of this application must be complete and all attachments must be included or NACCAS will return the application to you. If an item on the application does not apply to your institution, mark it N/A. Please refer to NACCAS' *Rules of Practice and Procedure* for details relevant to an application for branch campus accreditation. Documents must be submitted to NACCAS in accordance with Section 1.6 of the *Rules* and must be printed or typed.

A. MAIN CAMPUS INFORMATION

Main Campus Ref. No.: _____
 Name of Main Campus _____
 Street Address _____
 City _____ State _____ Zip _____
 Telephone: (_____) _____
 Date Main Campus was originally accredited by NACCAS: _____

B. UNIVERSAL BRANCHING APPLICATION REQUIREMENTS

Please answer “True” or “False” to each of the following statements. **This Application will not be approved unless all of the following statements in this Section B are true.**

	<u>True</u>	<u>False</u>
1. The Main Campus’s anniversary date for re-accreditation is more than twelve (12) months from the date of this application.	_____	_____
2. The Main Campus’s accreditation has not been withdrawn (pending appeal) and is not currently on probation, nor is the Main Campus currently subject to a show cause order.	_____	_____
3. The Main Campus has submitted its financial statements for its most recent fiscal year, those financial statements showed compliance with NACCAS’ Standard for Financial Practices and Management, and the Main Campus is not currently subject to financial reporting requirements.	_____	_____
4. The Main Campus has submitted the most recent annual report required to be submitted under NACCAS’ <i>Rules of Practice and Procedure</i> , that annual report showed compliance with NACCAS’ Standard for Educational Objectives and Institutional Evaluation, and the Main Campus is not currently subject to low outcomes monitoring or reporting requirements.	_____	_____

C. OWNER MAILING INFORMATION

This address must be used for correspondence regarding all branches approved under this Universal Branching Application.

Name of School Owner (If corporation or other entity, please list the entity’s official name).

Contact Person _____
Street Address _____
City _____ State _____ Zip _____
Telephone: (_____) _____ E-mail: _____
Fax: (_____) _____ Web site: _____

D. OWNERSHIP INFORMATION FOR MAIN CAMPUS

1. This institution is: ___ Private Nonprofit ___ Private For-Profit ___ Publicly Traded (check one)

Ownership Type A: Fill in this section if the owner is a _____ Sole Proprietorship or _____ Partnership (check one)

2. List the name and address of the sole proprietor or partners and their percentages of ownership.

Table with 3 columns: Name, Address, Percentage. Includes three blank rows for data entry.

3. Are there other individuals with an ownership interest of less than 10 percent? Yes ___ No ___

4. Has any owner, including those with less than a 10 percent share, been debarred from participation in any federal or state program within the past five (5) years? Yes ___ No ___

If this institution has Type A ownership, skip the sections on Types B and C ownership.

Ownership Type B: Fill in this section if the new owner is a corporation, limited liability company or other entity organized under state law (the “Owner Entity”).

- 5. Name of Entity: _____
6. State of Organization: _____
7. Date of Organization: _____
8. List all individuals or entities who own 10 percent or more of the Owner Entity.

Table with 3 columns: Name, Address, Percentage. Includes three blank rows for data entry.

9. Are there other individuals or entities with an ownership interest of less than 10 percent?
Yes _____ No _____

10. Has any owner, including those with less than a 10 percent share, been debarred from participation in any federal or state program within the past five (5) years? Yes _____ No _____

Type C Ownership: The Owner Entity listed under Type B is a wholly owned subsidiary of another corporation, limited liability company or other entity organized under state law: Yes _____ No _____

11. If the answer is “Yes,” you must list the other entities in the chart which follows:

Corporate Ownership high to closest to the school:
Rank 5:
Rank 4:
Rank 3:
Rank 2 (Type B Owner):

Note: You do not need to report Rank 4 unless a Rank 3 Owner is a wholly-owned subsidiary of another corporation, limited liability company or other entity organized under state law. You do not need to report Rank 5 unless a Rank 4 Owner is a wholly-owned subsidiary of another corporation, limited liability company or other entity organized under state law.

If the ownership structure of the Main Campus cannot be clearly described in this ranking format, please attach a separate sheet with full disclosure of up to three tiers of ownership.

E. REQUIRED ATTACHMENTS

You must submit eight (8) copies of this application with the attachments listed below.

1. Verification of attendance at a NACCAS accreditation workshop. (Note: See NACCAS’ Workshop Policy)
2. Application fee \$500.00

[Page intentionally ends here. Certification appears on page immediately following.]

F. CERTIFICATION

I certify that I have read and understand the following limitations on the use of this Universal Branching Application (if approved):

- 1. The Commission will review this Universal Branching Application on the basis of the applicant’s most recently-submitted financial statements. This Universal Branching Application will Terminate automatically on the due date of the applicant’s financial statements for the next fiscal year.
- 2. This Universal Branching Application will Terminate automatically upon the occurrence of any of the following events:
 - (a) The Main Campus’s accreditation is withdrawn (final or pending appeal), or placed on probation.
 - (b) The Main Campus is placed on any reporting requirement.
- 3. If, at any time, the Main Campus:
 - (a) Is placed on show cause; or
 - (b) Has outstanding past-due fees owed NACCAS;

then this Universal Branching Application will be Suspended, and no further branch applications will be permitted under this Universal Branching Application and Form 16B, until the show cause has been removed or the past-due fees have been paid, as applicable.

I hereby provide a release for purposes of eliciting information from state boards and government entities, as well as an acknowledgment of the fact that accrediting information may, at the discretion of NACCAS, be shared with other accrediting agencies and governmental entities.

I certify that I understand that the use of any technical assistance or consultation services provided by NACCAS does not in any way guarantee the grant of accreditation and that NACCAS’ Board of Commissioners has the final authority in determining an institution’s compliance with accreditation requirements.

I certify that the information provided herein is true and correct to the best of my knowledge and belief. I further understand that knowingly providing false or misleading information to NACCAS may result in the Commission taking adverse action against the institution.

School Owner/or other Designated Individual

Date