

FORM 1000 - ORIGINAL LICENSE APPLICATION

Attach Appropriate Fees

This application follows the requirements found in Arkansas Code Annotated § 6-51-601 et. seq. Rules and Regulations may be found on the State Board of Private Career Education website. Do not bind the forms/documents when submitting applications.

(Lines will expand as needed)

A. INFORMATION FOR THIS SCHOOL

NAME OF SCHOOL				
ADDRESS (LOCATION)				
CITY		STATE		ZIP
ADDRESS (MAILING)				
CITY		STATE		ZIP
TELEPHONE NUMBER		TOLL-FREE NUMBER		
WEBSITE		E-MAIL ADDRESS		
FAX NUMBER				
NAME OF ADMINISTRATIVE OFFICIAL				

B. OWNERSHIP

Part I

FORM OF OWNERSHIP (check one)	<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> OTHER - Explain	
NAME OF PARENT COMPANY			
NAME OF CONTACT PERSON			
ADDRESS (LOCATION)			
CITY		STATE	ZIP
ADDRESS (MAILING)			
CITY		STATE	ZIP
TELEPHONE NUMBER		TOLL-FREE NUMBER	
WEBSITE		E-MAIL ADDRESS	
FAX NUMBER			

Part II

1	Do any partners or shareholders have 10% or more ownership interest in the school?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2	If YES , how many people own interest in the school?	
3	Each partner or shareholder having 10% or more ownership interest in the school must complete and submit FORM 6000 – OWNERS BACKGROUND INFORMATION and FORM 6050 – ARKANSAS STATE POLICE IDENTIFICATION BUREAU INDIVIDUAL RECORD CHECK.	

C. LICENSE TYPES (SBPCE Rules and Regulations, Section I)

Select one by marking the type of license for which applying. If applying for multiple licenses, complete a separate form for each type of license requested.

1. Are you applying for a **SCHOOL LICENSE?** A *School License* is a license granted to any person, firm, partnership, association, corporation, or other form of organization seeking to do business or offering training or instruction
- (A) that leads to or enhances occupational qualifications.
 - (B) in flight or ground school to student fliers or mechanics.
 - (C) as preparation for passing exams which may lead to employment.
 - (D) in drivers education, excluding those courses taught motor vehicle violators pursuant to court order.

YES **NO** If **YES**, proceed to section D. If **NO**, proceed to C2.

2. Are you applying for a **SATELLITE SCHOOL LICENSE?** A *Satellite School License* is a license granted to those schools located in Arkansas that have a "School License" and want to offer programs at an additional Arkansas location on a continuing basis.

YES **NO** If **YES**, complete the information requested below and then proceed to section D. If **NO**, proceed to C3.

SATELLITE OF WHICH CURRENTLY LICENSED ARKANSAS SCHOOL	
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3. Are you applying for a **TRAVELING SCHOOL LICENSE?** A *Traveling School License* is a license granted to those organizations that desire to offer programs in various Arkansas cities or towns and whose total program length is less than or equal to one hundred (100) clock hours. Each license allows training to be offered in only one location at a time. A school can hold multiple traveling school licenses.

YES **NO** If **YES**, complete the information below and then proceed to section D. If **NO**, proceed to C4.

CITY/TOWN WHERE FIRST TRAVELING SCHOOL TRAINING PROGRAM WILL BE OFFERED	
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STREET ADDRESS WHERE FIRST TRAVELING SCHOOL PROGRAM WILL BE HELD	
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PROPOSED START DATE		PROPOSED END DATE	
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4. Are you applying for a **CAREER SEMINAR SCHOOL LICENSE?** A *Career Seminar School License* is a license granted to those organizations desiring to offer training that leads to or enhances occupational qualifications. Career Seminar training shall be presented in twenty-four (24) clock hours or less and the total cost of the program (tuition plus registration fees) shall be less than \$1,000.

YES **NO** If **YES**, answer the following questions:

Will the training be offered in only *one* town or city? **YES** **NO** If **YES**, complete the section A or B below marking the appropriate license fee based on the tuition. If **NO**, mark section C for your Career Seminar License that will allow you to move the training from town to town.

	License Fee	Highest Tuition	Total Cost of Program
A <input type="checkbox"/>	\$455	\$ 0 to \$499.99	One City or Town
B <input type="checkbox"/>	\$680	\$500 to \$999.99	One City or Town
C <input type="checkbox"/>	\$975	\$ 0 to \$999.99	Traveling

After selecting your school license type, proceed to section D.

D. RECORDS (SBPCE Rules and Regulations, Sections XVI, XIX, and XXV)

Submit a paper copy of the following school documents:

1	Maintenance of Records – Method of record maintenance and accessibility to record NOTE: Paper copies must be maintained in a fireproof file cabinet/storage unit. How does your school maintain student records (attendance, academic progress, etc.)? <input type="checkbox"/> Paper Records <input type="checkbox"/> Electronic Records <input type="checkbox"/> Both Paper and Electronic Records If the school maintains electronic records, how often is a back-up system run? <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other (List and explain below) Explain the program/system that you use and the offsite location of your back-up copy. <div style="background-color: #cccccc; height: 20px; width: 100%; margin-top: 5px;"></div>
2	Enrollment Agreement Application and/or Student/School Contract or other form used by the school for this purpose – Submit a paper copy of the form.
3	Student Financial Records – Submit a paper copy of the student financial record form used by the school. If necessary, attach information on the method used to record student financial information.
4	Attendance Records – Submit a paper copy of attendance record used by the school.
5	Student Transcript – Provide a paper copy of your school's student transcript form.
6	Completion Certificate/Diploma – Does your school award a Completion Certificate and/or Diploma ? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, submit a paper copy of the Completion Certificate and/or Diploma .
7	Placement Records – Does your school offer job placement assistance? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, submit a paper copy of the job placement assistance agreement/statement.

E. SCHOOL CATALOG/BULLETIN (SBPCE Rules and Regulations, Sections XXI and XIX)

1	Submit a printed copy of the SCHOOL CATALOG/BULLETIN .
2	Complete and attach FORM 7000 – CATALOG/BULLETIN CERTIFICATION .

F. PROGRAMS (SBPCE Rules and Regulations, Sections XIX and XXII)

Are you applying for a Career Seminar License? YES NO

1	If YES, complete FORM 1010 – CAREER SEMINAR SCHOOL LICENSE LIST OF PROGRAMS .
2	If NO, complete FORM 1020 –NEW PROGRAM OF STUDY for each program to be offered.

G. FIRE INSPECTION (SBPCE Rules and Regulations, Section XIX)

Submit a copy of a Fire Inspection Report that has been completed within the past twelve (12) months for this site.
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H. INSTRUCTORS (SBPCE Rules and Regulations, Section XIV)

Are you submitting an application for a Career Seminar License? YES NO

1	If YES, proceed to I .
2	If NO, select and complete the appropriate INSTRUCTOR RECORD OF QUALIFICATIONS document (FORM 3000, 3020, 3040, 3060, 3070, or 3080) for each instructor.

I. ADMISSIONS REPRESENTATIVES (AD REPS) (SBPCE Rules and Regulations, Section III)

1	Will Admissions Representatives (AD REP) be employed?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2	If NO, proceed to Section J.	
3	If YES, how many AD REPS do you anticipate employing during the first six months of licensure?	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div>
4	For each AD REP, complete and submit FORM 5000 – ADMISSIONS REPRESENTATIVE ORIGINAL APPLICATION . An Admissions Representative license must be issued prior to the person assuming the duties as an AD REP.	

J. GENERAL INFORMATION (SBPCE Rules and Regulations, Sections II, XXII, and XXVII)

1	Does your school require a student to have a high school diploma or GED? <input type="checkbox"/> YES <input type="checkbox"/> NO
2	Does your school offer scholarships? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , a file must be maintained at the school with information on all scholarships available to students.
3	Does the school offer Drivers Education? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES complete and submit FORM 4700 – DRIVERS EDUCATION INSURANCE CERTIFICATION with appropriate attachments.

K. FINANCIAL INFORMATION (SBPCE Rules and Regulations, Section XII)

Provide the required information below that is appropriate to your school.

1	Name and address of financial institution(s) with which the school does business:	
	NAME	CITY
	STATE	ZIP
1	NAME	CITY
	STATE	ZIP
Name(s) under which the account(s) are carried:		
2	List the date the school's fiscal year ends (Example: June 30):	
3	Does the school participate in Federal Financial Aid Programs? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , submit the most recent copy of the audit of such Programs as submitted to the Education Department Audit Agency, Office of Inspector General.	
4	Is your school a hospital-based school? <input type="checkbox"/> YES <input type="checkbox"/> NO If NO , go to K5 . If YES , submit copies of the department budgets .	
5	Is your school's highest program tuition equal to or less than one thousand dollars (\$1,000)? <input type="checkbox"/> YES <input type="checkbox"/> NO If NO , go to K6 . If YES , attach the following:	
	A	BALANCE SHEET AND
	B	If the school is licensed in other states, submit the following: 1. Statement of income and retained earnings; 2. Statement of cash flows; 3. Gross amount of annual student tuition and fees for each school; AND 4. If prepared by an accountant, attach the accountant notes to the financial statement.
6	With your school tuition in excess of one thousand dollars (\$1,000), submit the following:	
	A	FINANCIAL STATEMENT THAT INCLUDES A BALANCE SHEET prepared by a certified public accountant or public accountant registered with the appropriate Board of Public Accountancy AND
	B	If the school is licensed in other states, submit the following: 1. Statement of income and retained earnings; 2. Statement of cash flows; 3. Gross amount of annual student tuition and fees for each school; AND 4. Attach the accountant notes to the financial statement.

L. STATE LICENSURE AND ACCREDITATION (SBPCE Rules and Regulations, Sections XXII and XXX)

1	Is the school currently approved/licensed in other states? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , list the state(s).
1	List the home state of the school and attach proof of licensing approval from that state.
2	Has a license of this school ever been suspended or revoked? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , provide written documentation as to the cause of the suspension or revocation, state in which the action took place, date of the action, and any other pertinent information concerning the suspension or revocation.

3	Has any school license of this ownership or any individual member of this ownership ever had a school license suspended or revoked? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , provide written documentation as to the cause of the suspension or revocation, the name of the school, the state where the incident occurred, the date of the action, and any other pertinent information concerning the suspension or revocation.						
4	Is the school accredited? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , complete the following:						
	<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Accrediting Commission</td> <td style="width: 40%;"></td> <td style="width: 30%;"></td> </tr> <tr> <td>Date of Original Accreditation</td> <td></td> <td>Date of last on-site visit</td> </tr> </table>	Accrediting Commission			Date of Original Accreditation		Date of last on-site visit
Accrediting Commission							
Date of Original Accreditation		Date of last on-site visit					

M. SURETY BOND (SBPCE Rules and Regulations, Section VI)

Is the highest tuition for any program in your school more than \$3,000? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , submit a completed FORM 4600 – SURETY BOND FORM for ten thousand dollars (\$10,000).
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N. LEGAL ACTIONS (SBPCE Rules and Regulations, Section XV)

Have any legal actions been initiated against or by this school or against or by this ownership or against or by any individual member of this ownership in the last twelve (12) months? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , submit a completed FORM 8100 – LEGAL ACTION NOTIFICATION .
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O. MAILING LIST (SBPCE Rules and Regulations, Section XXII)

Has the State Board of Private Career Education been placed on the school's e-mail and mailing lists? <input type="checkbox"/> YES <input type="checkbox"/> NO If NO , <i>immediately</i> add SBPCE to the school's e-mail and mailing list.

P. FEES

Complete and submit FORM 1090 – ORIGINAL APPLICATION FEE WORKSHEET . Attach appropriate fees.
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Q. STUDENT PROTECTION TRUST FUND (SPF)

<p>You will be billed for the Student Protection Fund after the Board approves your license.</p> <p>The SPF Fee at the time of application for an original license shall be determined by adding together the tuition charged by the organization for each program offered. This total is multiplied by 5% to determine the amount due, but shall not be less than one hundred dollars (\$100)</p> <p style="text-align: center;"> _____ X .05 = _____ (Total Tuition For All Programs) (Amount Due) </p> <p style="text-align: center;">DO NOT SUBMIT SPF payment with this application. You will be billed.</p>

STATEMENT OF COMPLIANCE

Under penalty of perjury, I declare and affirm that the statements made on this form, including any attached sheets, are true, complete, and accurate, and I affirm that I have read the Arkansas Code Annotated § 6-51-601 et.seq. and the Rules and Regulations of the State Board of Private Career Education and that if a license is granted, I will operate in compliance with the laws of Arkansas and the Regulations of the State Board of Private Career Education.

I further understand that if the Board denies my request as a licensed school, no fees are refundable.

Printed Name of Official		Title	
Signature of Official (Sign in Blue Ink)		Date	