



ARKANSAS STATE BOARD OF PRIVATE CAREER EDUCATION

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FORM 8100

LEGAL ACTION NOTICE

NAME OF SCHOOL \_\_\_\_\_

ADDRESS (LOCATION) \_\_\_\_\_

ADDRESS (MAILING) \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ TOLL FREE NUMBER \_\_\_\_\_

FAX NUMBER \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

WEBSITE \_\_\_\_\_

ADMINISTRATIVE OFFICIAL AT THIS SITE \_\_\_\_\_

NAME AND TITLE OF PERSON SUBMITTING INFORMATION \_\_\_\_\_

THIS IS TO NOTIFY THE BOARD STAFF THAT LEGAL ACTION WAS FILED ON \_\_\_\_\_ DATE

\_\_\_\_\_ AGAINST US, BY \_\_\_\_\_

\_\_\_\_\_ BY US, AGAINST \_\_\_\_\_

BRIEFLY EXPLAIN \_\_\_\_\_

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\_\_\_\_\_  
Typed Name of Official Title

\_\_\_\_\_  
Signature of Official Date