

NOTIFICATION OF A NON-SUBSTANTIVE CHANGE:
EXPANSION OR REDUCTION OF CAMPUS FACILITIES/
ADDITIONAL CLASSROOM SPACE

Please submit two (2) copies of this form at least thirty (30) days prior to the change, unless otherwise directed by this form. **Include the nonrefundable application processing fee of \$695.00 with your submission.** Please note that you may be assessed late fees if this change is not received on time, for which you will be billed at a separate time. (Note for Candidate Schools: If the change occurs prior to the initial accreditation on-site evaluation, no fee is required. If the change occurs after the initial accreditation on-site evaluation, the appropriate fee is required.) Please retain a copy of this entire application (including attachments) for your records.

1. Ref. # of institution where this this change will occur: _____
2. Name of institution where this change will occur: _____
3. ***Date change occurred / is scheduled to occur:*** _____
4. Is the institution's accreditation status currently "accreditation on probation?" Yes ____ No ____
5. Is this notification being submitted sixty (60) days after the change occurred? Yes ____ No ____

If you answered yes to question #5 above, please submit seven (7) copies of this application to NACCAS, as pursuant to Section 4.15(b) of NACCAS' Rules, this change is now considered substantive (meaning it requires Commission approval). Additionally, please include an extra \$200 processing fee with this application in order to cover the costs associated with Commission review.

(Continue to page 2)

6. Select either Type A, B or C below, and complete the relevant section. (You cannot select more than one.) For the sections that do not apply, mark the box indicating N/A.

Type A: Addition or reduction of contiguous space where the aggregate change in total space is greater than 25% of the existing approved space.

Please note that contiguous space is defined as multiple suites/areas within the same building which are adjoining (i.e., space where an individual can walk to all parts of the institution’s facility without ever leaving the institution’s space.)

Type A is Not Applicable (N/A)

➤ If adding or reducing classroom space, does this additional space have a separate address or suite number associated with it?

Yes _____ No _____ N/A _____

(If yes, include addresses for primary and additional space below; otherwise, mark as N/A)

Primary Facility Address: _____

Address of Add’l Space: _____

Type B: Addition of non-contiguous additional classroom space facilities within a two (2) mile radius of the primary campus facility.

Type B is Not Applicable (N/A)

➤ Will the additional classroom space facility be used to teach more than 50% of any course approved by NACCAS?

Yes _____ No _____

If you answered yes to the question above, STOP and email jtiezzi@naccas.org before continuing with this form.

➤ Please indicate the addresses of the primary facility and additional classroom space facility below. Please make sure to include complete addresses!

Primary Facility Address: _____

Additional Classroom Space Address: _____

Type C: Removal of additional classroom space

Type C is Not Applicable (N/A)

➤ Please indicate the address of the additional classroom space you no longer wish to utilize below:

7. Please submit all required attachments as indicated below:

- Type A and B Changes:** Letter from the state regulatory agency approving the new space, or other evidence the state has approved/acknowledged the expanded space
- Type A and B Changes:** Certificate of Occupancy (C.O.) for the new space from your local or county government. If a C.O. cannot be obtained, the institution must submit (i) proof that a C.O. is not required by the local government and (ii) proof that the local government has determined that the new space is appropriate for its intended purpose and safe for public use (e.g., final inspection report from local government).
- Type A Changes Only:** Floor plan and dimensions, including total sq. footage, for the original facility
- Type A and B Changes:** Floor plan and dimensions, including total sq. footage, for the new additional classroom space
- Type B Changes Only:** Distance verification to show distance between primary and additional classroom facilities (i.e. Google Maps printout, etc.)
- Type A, B and C Changes:** Non-Refundable Non-Substantive Change Fee of \$695*, along with an additional \$200 processing fee if you answered “yes” to question #5 of this application

*Note for Candidate Schools: If the change occurs prior to the initial accreditation on-site evaluation, no fee is required. If the change occurs after the initial accreditation on-site evaluation, the appropriate fee is required. Refer to Section 4.16 of the *Rules*.

CERTIFICATION

I hereby acknowledge that once a final Certificate of Occupancy or its equivalent is issued by my local government, the institution will not make any additional changes to its facilities or additional classroom space without first contacting NACCAS.

I hereby certify that the institution for which this application is being made is not under any citation by the state licensing agency for any violations of licensing laws. The institution will not make any promotional use of the application prior to approval of this application by NACCAS.

In addition, 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 approval of this application 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.

Institution’s Owner/or Official Contact Person Signature

Date

Print Name (clearly)

Date

***Reminder: It is the institution’s obligation to notify the U.S. Department of Education of changes, if applicable.**