



**SCHOOLS RENEWING SECOND QUARTER FOR  
APPROVAL FROM JULY 1, 2023 THROUGH JUNE 30, 2024 RENEWAL  
APPLICATION  
FOR A DELAWARE CERTIFICATE OF APPROVAL  
TO OPERATE A PRIVATE BUSINESS OR TRADE SCHOOL**

Each school shall annually renew its certificate of approval and pay the required annual renewal fee.

**I. SCHOOL AND CONTACT INFORMATION**

a. **Name of School:** \_\_\_\_\_

Complete Address of Location of Instruction: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Location of Operation. Check one:

School operating in  
Delaware

School operating outside  
of Delaware

School operating in Delaware  
and outside of Delaware

Type of School. Check all that apply:

Business       Trade       Technical       Correspondence       Other: \_\_\_\_\_

b. **The certificate holder is a/an:**     Individual     Corporation\*     Partnership

Name of Certificate Holder: (\*If a corporation owns the school, **list the corporation** as the certificate holder. Provide the complete name of the corporation, **not the name of the owner.**)

\_\_\_\_\_

Certificate Holder's Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**I. SCHOOL AND CONTACT INFORMATION**

If a corporation, what is the state of incorporation? \_\_\_\_\_

Name(s) of **all** Controlling Officers of the corporation \_\_\_\_\_  
(use an additional sheet of paper if more than 3)

\_\_\_\_\_

\_\_\_\_\_

**c. Name of Administrator in Charge of School:** \_\_\_\_\_

Title: \_\_\_\_\_

Fax: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**d. Name of Contact Person for Delaware Department of Education:**

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title: \_\_\_\_\_

Fax: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**e. Name of Contact Person for Prospective Students:**

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title: \_\_\_\_\_

Fax: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**f. Website Information**

Provide the website address below:

\_\_\_\_\_

## II. COMMITMENTS

The following commitments are required under 14 *Del.C.* Ch. 85:

**(I) (We) solemnly agree as follows:**

1. My position with the applicant school is \_\_\_\_\_ and I am authorized to make these commitments and representations on behalf of the school.\*
2. To read, understand, and conduct the school in accordance with Delaware Law and standards, rules, and regulations from time to time established by the Department of Education of the State of Delaware.
3. To maintain a surety bond for the protection of the contractual rights of students in the form and amount required by the Department of Education.
4. To abide by the refund policy established in 14 *Del.C.* Ch. 85 for cancellation of the contract or agreement or by the policy of the U.S. Department of Veterans Affairs.
5. That, within the 72-hour grace period reserved for cancellation, the school will not discount any evidence of indebtedness given by a student applicant, or on his behalf, or in any other way place such evidence of indebtedness into the hands of a holder in due course.
6. To permit the Department to inspect the school or classes thereof from time to time; and to make available to the Department, at any time when required to do so, information pertaining to the activities of the school required for the administration of this Act.
7. That all advertising and solicitation by the school will be free from misrepresentation, deception, or fraud and that no fraudulent or deceptive statements shall be made as to possible future employment opportunities or wage expectations.
8. That the certificate of approval shall be prominently displayed at some place on the premises of the school open to the inspection of all interested persons.
9. If a school located in Delaware, to comply with the provisions of 14 Del. C. §8530 and agree to convey all student records to the Department of Education and to accept the other obligations set forth in section §8530 should my school cease to operate in Delaware.

**(I) (We), the undersigned, affirm that the agreements made and the information set forth in the foregoing application and in the attachments thereto are complete, true, and correct to the best of my (our) knowledge.**

Date: \_\_\_\_\_ Signature(s)\*: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires:

\_\_\_\_\_  
Date Name of Notary Public (print or type)  
\_\_\_\_\_  
Signature of Notary Public

\*Each application for a certificate of approval shall be signed by the applicant. If the applicant is a **partnership**, it shall be signed by **each member** thereof. If the applicant is a corporation, **any officer** thereof shall sign it. 14 *Del.C.* Ch. 85.

**III. NOTARIZED STATEMENT OF REVENUE SUBJECT TO SURETY BOND FOR  
OUT-OF-STATE OR SPECIAL\* DELAWARE SCHOOLS**

**Complete this page ONLY if the school is located outside of Delaware and solicits students in the State  
OR**

**\*If the school is located in Delaware and is set up as a school that does not receive any revenue directly from  
students.**

**All such schools shall be required to post a bond in the amount of \$25,000 or more (14 *Del.C.* Ch. 85). The bond must be  
valid for the renewal year **July 1, 2023 to June 30, 2024** Provide ALL requested information.**

The school's surety bond, payable to the State of Delaware, Department of Education, is in the amount of  
\$25,000 or more and is in effect through \_\_\_\_\_ (expiration date) OR is a currently valid  
continuous surety bond that must be renewed on \_\_\_\_\_ (date of next renewal payment).

The amount of the bond is to be computed in accordance with 14 *Del.C.* Ch. 85, §8505, subsection (b).

Surety Bond Company Name: \_\_\_\_\_

Surety Bond Company Address: \_\_\_\_\_

\_\_\_\_\_

Contact Person at Surety Bond Company: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**I, the undersigned, affirm that the preceding information is complete, true, and correct to the best of my knowledge.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Name (print or type)

\_\_\_\_\_  
Position or Title in the School

\_\_\_\_\_  
Signature

SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Notary Public (print or type)

\_\_\_\_\_  
Signature of Notary Public

Surety bonds may only be cancelled during or at the end of any annual term by the bonding agency by giving 45 days prior notice in writing by certified mail, return receipt requested, to the Administrator, Private Business and Trade Schools, Delaware Department of Education, 401 Federal Street, Suite #2, Dover, Delaware 19901-3639 (14 *Del.C.* Ch. 85).

**III. NOTARIZED STATEMENT OF REVENUE SUBJECT TO SURETY BOND FOR DELAWARE SCHOOLS**

**Complete this page ONLY if the school is located in Delaware.** The surety bond for in-state schools is in the amount equal to the highest anticipated gross prepaid tuition for students enrolled on any given day in the calendar year for which a certificate of approval is requested (14 *Del.C.* Ch. 85, §8505, subsection (b)). The bond must be valid for renewal year   **July 1, 2023 to June 30, 2024. Provide ALL requested information.**

The amount of the bond is to be computed in accordance with 14 *Del.C.* Ch. 85,  
During this last year, 20\_\_\_\_, the highest amount of gross prepaid tuition for students enrolled that (name of school) \_\_\_\_\_ had on account on any given day was \$\_\_\_\_\_. The day on which this occurred was \_\_\_\_\_, 20\_\_\_\_. The number of students enrolled on that date was \_\_\_\_\_.

In the next calendar year, 20\_\_\_\_, the highest amount of gross prepaid tuition for students enrolled that (name of school) \_\_\_\_\_ expects to have on account on any given day is \$\_\_\_\_\_. This estimate is based on (the expected number of students) \_\_\_\_\_ enrolled on that given day.

The school's surety bond, payable to the State of Delaware, Department of Education, is in the amount of \$\_\_\_\_\_ and is in effect through \_\_\_\_\_ (expiration date) OR is a currently valid continuous surety bond that must be renewed on \_\_\_\_\_ (date of next renewal payment).

Surety Bond Company Name: \_\_\_\_\_

Surety Bond Company Address: \_\_\_\_\_

Contact Person at Surety Bond Company: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Name (print or type)

\_\_\_\_\_  
Position or Title

\_\_\_\_\_  
Signature

SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Notary Public (print or type)

\_\_\_\_\_  
Signature of Notary Public

Surety bonds may only be cancelled during or at the end of any annual term by the bonding agency by giving 45 days prior notice in writing by certified mail, return receipt requested, to the Administrator, Private Business and Trade Schools, Delaware Department of Education, 401 Federal Street, Suite #2, Dover, Delaware 19901-3639  
14 *Del.C.* Ch. 85.

**IV. DISPOSITION OF STUDENT RECORDS FOR DELAWARE SCHOOLS**

**(Out-of-state schools are not required to complete this form)**

Delaware Law-14 *Del. C.* §8530 states:

(a) Notwithstanding any exemptions to the contrary in this chapter, all postsecondary institutions authorized, approved or licensed by the Department of Education to operate in the State under this chapter or under § 125 of Title 8 prior to discontinuing operation shall perform the following duties:

- (1) Notify in writing the Department of Education and all currently enrolled students of the decision to cease operation;
- (2) Notify in writing all currently enrolled students, and students enrolled during the 5 prior years, that information concerning student records may be obtained from the Department of Education;
- (3) Convey all student records to the Department of Education, or to another location designated by the Department, for safekeeping and for reproduction as requested by the students.

(b) As used in this section, “student records” shall mean all those documents that are necessary to provide a meaningful record of student performance and financial aid and shall include, but not be limited to, the following:

- (1) Academic records, including written evaluations, competency assessments, etc.
- (2) Catalogues;
- (3) Change of grade forms;
- (4) Class lists, including original grade sheets;
- (5) Commencement programs/graduation lists;
- (6) Schedules of classes;
- (7) Financial aid transcripts and supporting documents (65 Del Laws, c. 103, §1; 71 Del Laws, c. 180, §190.)

I have read the above law relating to the disposition of student records and understand that, as an approved Private and Business and Trade School, I will be required to comply with the provisions of 14 *Del. C.* §8530 and do hereby agree to accept the obligations set forth in Section §8530 should my school cease to operate in Delaware.

Date \_\_\_\_\_

Owner’s/Officer’s/Partners Signature(s) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## V. REQUIRED ATTACHMENTS/ENCLOSURES

Use spaces at the left to check off your attachments/enclosures to ensure a complete application. The shaded attachments/enclosures are required. If there are no changes in any of the other two (2) attachments/enclosures since the **2022-2023** renewal application, or for an original certificate of approval through **July 1, 2021** you do not have to provide the documentation in this renewal application. Instead, initial the statement that indicates no changes during **July 1, 2022 through June 30, 2023** and complete the corresponding part(s) of Section V, Notarized Statement for Attachments and Enclosures.

\_\_\_\_\_ **A. A current catalogue.** Mark clearly as Attachment A.

**B. If changed** since the **2022-2023** renewal application, **a description or chart of the managerial organization of the school.** Mark clearly as Attachment B. If this is in your catalogue, state the page on which it can be found: \_\_\_\_\_.

*Otherwise, if no changes* in the managerial organization of the school since the **2022-2023** renewal application, initial here: \_\_\_\_\_.

\_\_\_\_\_ **C. If changed** since the **2022-2023** renewal application, **the names of instructional staff, their qualifications, and the courses they teach.** If in your catalogue, state the page on which it can be found: \_\_\_\_\_. If licensure or other qualifications are necessary to teach the course, they must be listed. If licensure or certification is required, attach documentation that the staff member currently holds the certificate/license. Clearly mark all required information as Attachment C.

*Otherwise, if no changes* in the names of instructional staff, their qualifications, and the courses they teach since the **2022-2023** renewal application, initial here: \_\_\_\_\_.

\_\_\_\_\_ **D. A list of the programs that the school will offer the July 1, 2023 through June 30, 2024. Renewal Year as well as costs for each program. Indicate whether each program is approved for Title IV money, scholarships, and/or veterans benefits, and check or list any national certifications it may have.** Use the Attachment D form.

\_\_\_\_\_ **E. List all major equipment made available for instruction for each program.**  
Use the Attachment E form.

\_\_\_\_\_ **F. A labeled drawing of the school's physical and sanitary facilities** (such as the buildings, classrooms, labs, clinics, offices, and rest rooms). Mark clearly as **Attachment F.** If in your catalogue, state the page on which it can be found: \_\_\_\_\_.

\_\_\_\_\_ **G. Copies of all advertisements or promotional materials** used now or in the last year, including transcription of any radio/TV spots. Mark clearly as **Attachment G.**

If the school did **not** advertise or use promotional materials in **2022-2023**, check here \_\_\_\_\_ and initial \_\_\_\_\_.

\_\_\_\_\_ **H. A blank copy of the school's student application.** Mark clearly as **Attachment H.** If in your catalogue, state the page on which it can be found: \_\_\_\_\_.

\_\_\_\_\_ **I. A blank copy of the school's student enrollment agreement/contract.** Mark clearly as **Attachment I.** If in your catalogue, state the page on which it can be found: \_\_\_\_\_.

## V. REQUIRED ATTACHMENTS/ENCLOSURES

- \_\_\_\_\_J. **A statement of enrollment figures** for the past year, showing the number of students from Delaware, those from out-of-Delaware, and the total enrollment. Use the **Attachment J** form. Also add a roster of students who were enrolled from July 1, 2022-June 30, 2023 and label as current, graduates, or withdrawals.
- \_\_\_\_\_K. **A copy of the school's refund policy** that must comply with 14 *Del.C.* Ch. 85. Mark clearly as **Attachment K**. If in your catalogue or on your application form or enrollment agreement/contract, state the location or page on which it can be found: \_\_\_\_\_.
- \_\_\_\_\_L. **A copy of the school's entrance policy** that must comply with 14 *Del.C.* Ch. 85 or with the policy of the U.S. Department of Veterans Affairs. Mark clearly as **Attachment L**. If in your catalogue or on your application form or enrollment agreement/contract, state the location or page on which it can be found: \_\_\_\_\_.
- \_\_\_\_\_M. **A copy of the school's complaint procedure.** Mark clearly as **Attachment M**. If in your catalogue, state the page on which it can be found: \_\_\_\_\_.
- \_\_\_\_\_N. **A copy of any current certificates of accreditation** that the school may hold. Mark clearly as **Attachment N**.
- If the school does not hold any certificates of accreditation, **check here** \_\_\_\_\_ and **initial** \_\_\_\_\_.
- \_\_\_\_\_O. **From the bonding company, proof of a surety bond valid from July 1, 2023 to June 30, 2024.** The surety bond is in the amount of \$\_\_\_\_\_ and is in compliance with 14 *Del.C.* Ch. 85. Mark clearly as Attachment O.

### **Note that all bonds should be made out to the State of Delaware, Department of Education**

Proof is required for all surety bonds, including continuous ones. The proof must come from the bonding company and include:

- The name of the private business and trade school
- The name of the bonding company
- The bond number
- The amount of the bond
- The period in which the bond will be in effect (**must be valid for the entire renewal year**)

A faxed statement or e-mail from the bonding company is acceptable. An invoice from the bonding company (with no record of payment does not meet the requirement.

- \_\_\_\_\_P. **A 2023 certificate of good standing (proof of corporate status)** if a corporation owns the school. Mark clearly as **Attachment P**.

The renewal requirement is a **2023** certificate of good standing; thus, certificates of good standing for **2020** or earlier, papers of incorporation, business licenses, and/or certificates of incorporation do not meet this requirement.



If the state of incorporation is Delaware, contact the Delaware Division of Corporations to obtain a certificate of good standing.

Address	Address for Expedited Delivery	Telephone Number	Fax Numbers
Delaware Division of Corporations P.O. Box 898 Dover, DE 19903	Delaware Division of Corporations 401 Federal Street, Suite 4 Dover, DE 19901	302-739-3073	302-739-3812 302-739-3813

- \_\_\_\_\_ **Q.** **A non-refundable check or money order of \$50.00 FOR EACH SEPARATE SCHOOL** made payable to the State of Delaware, Department of Education. Paper clip to the front of the renewal application.
- \_\_\_\_\_ **R.** **Current financial documents: Balance Sheet, Profit and Loss Report or Income Statement.**
- \_\_\_\_\_ **S.** **Current business licenses.**

**MAIL TO: DELAWARE DEPARTMENT OF EDUCATION  
ATTENTION: DR. PATRICIA KEETON  
35 COMMERCE WAY, SUITE #1  
DOVER, DE 19904**

VI. NOTARIZED STATEMENT FOR ATTACHMENTS AND ENCLOSURES

Complete this page **ONLY** if you have initialed any of the required attachments and enclosures in Section IV as “no change” since the 2022- 2023 renewal application or a 2022-2023 application for an original certificate of approval. Make certain that all attachments and enclosures that you have initialed as “no change” on pages 5 are also checked below.

I have indicated by my initials on the preceding pages that there have been no changes in the following since the 2021-2022 renewal application or a 2021-2022 application for an original certificate of approval:

<p>_____ B. Organizational chart</p> <p>_____ C. Instructional staff</p>
--

I, the undersigned, affirm that the preceding information regarding no changes since the 2022-2023 renewal application or the 2022-2031 application for an original certificate of approval is complete, true, and correct to the best of my knowledge.

Date: \_\_\_\_\_

\_\_\_\_\_  
Name (print or type)

\_\_\_\_\_  
Position or Title

\_\_\_\_\_  
Signature

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Notary Public (print or type)

\_\_\_\_\_  
Signature of Notary Public

ATTACHMENT D  
PROGRAMS OF INSTRUCTION FOR 2023-2024 FIRST QUARTER RENEWAL YEAR

Programs to be Offered in 2023-2024 First Quarter Renewal Year	Number of Clock Hours per Week		Length of Program		TOTAL Cost of Program	Scholarship/s Available		Title IV Federal Funds Available		Approved for Veterans Educational Benefits	
	Theory	Lab or Shop	Total Weeks	Total Hours		Yes	No	Yes	No	Yes	No

**Note: Please copy this page if school offers more than 8 programs.**

School is nationally accredited by \_\_\_\_\_ ACCSCT      \_\_\_\_\_ ACCET      \_\_\_\_\_ Other

\_\_\_\_\_

\_\_\_\_\_ School is not nationally accredited



**ATTACHMENT J**

**ENROLLMENT FIGURES**

**July 1, 2022 through June 30, 2023**

Name of School: \_\_\_\_\_

Students enrolled from Delaware: \_\_\_\_\_

Students enrolled from out-of-Delaware: \_\_\_\_\_

Total student enrolment: \_\_\_\_\_

ATTACH A ROSTER OF STUDENTS TO SUPPORT ABOVE FIGURES. OUT OF STATE SCHOOLS ONLY ATTACH DELAWARE STUDENTS.

**RENEWAL APPLICATION**  
**FOR A RENEWED PERMIT TO ACT AS AN AGENT**  
**FOR A PRIVATE BUSINESS OR TRADE SCHOOL IN DELAWARE**

**Year:** 2023-2024 First Quarter Renewal for July 1, 2023 through June 30, 2024

Application is hereby made for a **RENEWAL** of a permit to represent a private business or trade school, in accordance with 14 *Del.C.* Ch. 85. A separate permit is required for each agent for each school represented. Complete an application for each agent.

**I. Name of Applicant:** \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**II. Name of School:** \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**Check one:**

School operating in  
Delaware

School operating outside  
of Delaware

School operating in  
and outside of Delaware

**III. Renewal Fee of \$5.00**

With this renewal application for a permit to act as an agent for the above named school, include a check for **\$5.00** payable to the State of Delaware, Department of Education. The renewal fee is non-refundable.

The renewal fee is not required if the agent is also a **principal owner** of the school.

Character references are **NOT** required for those agents who have represented the above-referenced school in the previous year and who are applying for a renewal to continue to so represent the school.

**RENEWAL APPLICATION**  
**FOR A RENEWED PERMIT TO ACT AS AN AGENT**  
**FOR A PRIVATE BUSINESS OR TRADE SCHOOL IN DELAWARE**

**IV. Verification of Employment**

I, the undersigned, affirm the information set forth in this verification of employment and the attachments thereto are complete, true, and correct to the best of my knowledge. (Name of applicant) \_\_\_\_\_

\_\_\_\_\_ is presently employed by us and is to act as our agent to represent our school in the State of Delaware for the purpose of soliciting students. (He)(She) has been in our employ for \_\_\_\_ years and \_\_\_\_ months and is found by us to be truthful, honest, and of good reputation. I request that a permit be granted to said person for purposes of soliciting students in Delaware.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Employer (print or type)

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature of Employer

SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Notary Public (print or type)

\_\_\_\_\_  
Signature of Notary Public

**V. Verification of Applicant**

I, the undersigned, affirm that the information set forth in this application and the attachments thereto are complete, true, and correct to the best of my knowledge and that I will carry out all of the activities of representing as an agent of (name of school) \_\_\_\_\_ in a truthful and honest manner.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Applicant (print or type)

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature of Applicant

SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Notary Public (print or type)

\_\_\_\_\_  
Signature of Notary Public

**ORIGINAL APPLICATION**

**FOR A NEW PERMIT TO ACT AS AN AGENT**

**FOR A PRIVATE BUSINESS OR TRADE SCHOOL IN DELAWARE**

**Year:** 2023-24 First Quarter Renewal for July 1, 2023 through June 30, 2024

Application is hereby made for an **ORIGINAL** permit to represent a private business or trade school, in accordance with 14 *Del.C.* Ch. 85. A separate permit is required for each agent for each school represented. Complete an application for each agent. Include two character references for each agent.

**I. Name of Applicant** \_\_\_\_\_

Address: \_\_\_\_\_

**II. Name of School:** \_\_\_\_\_

Address: \_\_\_\_\_

**Check one:**

- School operating in Delaware
- School operating outside of Delaware
- School operating in and outside of Delaware

**Type of School - Check one or any combination:**

- Business
- Trade
- Technical
- Correspondence
- Other: \_\_\_\_\_

**III. Commitments**

**I solemnly agree as follows:**

- A.** To represent the school in accordance with Delaware Law and standards, rules and regulations from time to time established by the Delaware Department of Education.
- B.** That all advertising and solicitation by the school will be free from misrepresentation, deception or fraud, and that no fraudulent or deceptive statements shall be made as to possible future employment opportunities or wage expectations.
- C.** That I am a person who is honest, truthful and of good reputation.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**IV. Attachments:** Supply the following materials with this application. Use spaces at the left to check off your attachments to ensure a complete application.

\_\_\_\_\_ **A.** Completed character references. Each agent shall supply two.

\_\_\_\_\_ **B.** **Check for ten dollars (\$10.00)**, made payable to the State of Delaware, Delaware Department of Education (not refundable). The fee is not required if the agent is also a principal owner of the school.



**ORIGINAL APPLICATION**  
**FOR A NEW PERMIT TO ACT AS AN AGENT**  
**FOR A PRIVATE BUSINESS OR TRADE SCHOOL IN DELAWARE**

**V. Verification of Employment:**

I, the undersigned, affirm that the information set forth in this verification of employment and the attachments thereto are complete, true, and correct to the best of my knowledge. (Name of applicant)

\_\_\_\_\_ is presently employed by us and is to act as our agent to represent our school in the State of Delaware for the purpose of soliciting students. (He)(She) has been in our employ for \_\_\_\_ years and \_\_\_\_ months and is found by us to be truthful, honest, and of good reputation. I request that a Permit be granted to said person for purposes of soliciting students in Delaware.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Employer (print or type)

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature of Employer

SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Name of Notary Public (print or type)

\_\_\_\_\_  
Signature of Notary Public

**VI. Verification of Applicant**

I, the undersigned, affirm that the information set forth in this application and the attachments thereto are complete, true, and correct to the best of my knowledge, and that I will carry out all of the activities of representing as an agent of (name of school) \_\_\_\_\_ in a truthful and honest manner.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Applicant (print or type)

\_\_\_\_\_  
Signature of Applicant

SWORN TO AND SUBSCRIBED before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Notary Public (print or type)

\_\_\_\_\_  
Signature of Notary Public

**FOR ORIGINAL APPLICATIONS ONLY**  
**FOR A NEW PERMIT**  
**CHARACTER REFERENCE FOR AN AGENT**  
**REPRESENTING A PRIVATE BUSINESS AND TRADE SCHOOL**  
**IN DELAWARE UNDER 14 *DEL C.* CH. 85**

**Recommendation**

Pursuant to 14 *Del.C.* Ch. 85, regarding the issuance of permits to agents representing private business and trade schools in Delaware, I (name), \_\_\_\_\_, do hereby attest that the applicant stated below has been found to be truthful, honest, and of good reputation and I recommend that a permit be granted to serve as an agent for the school as named.

**Name of Agent** \_\_\_\_\_

Address \_\_\_\_\_

**Name of School** \_\_\_\_\_

Address \_\_\_\_\_

**Basis for Recommendation**

I have known the applicant for \_\_\_\_\_ years in the capacity of \_\_\_\_\_  
(co-worker, employer, friend, etc.).

Comments about the applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Person Making Recommendation (print or type)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of Person Making Recommendation

\_\_\_\_\_  
Telephone Number

**FOR ORIGINAL APPLICATIONS ONLY**  
**FOR A NEW PERMIT**  
**CHARACTER REFERENCE FOR AN AGENT**  
**REPRESENTING A PRIVATE BUSINESS AND TRADE SCHOOL**  
**IN DELAWARE UNDER 14 *DEL C.* CH. 85**

**Recommendation**

Pursuant to 14 *Del.C.* Ch. 85, regarding the issuance of permits to agents representing private business and trade schools in Delaware, I (name), \_\_\_\_\_, do hereby attest that the applicant stated below has been found to be truthful, honest, and of good reputation and I recommend that a permit be granted to serve as an agent for the school as named.

**Name of Agent** \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**Name of School** \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**Basis for Recommendation**

I have known the applicant for \_\_\_\_\_ years in the capacity of \_\_\_\_\_  
(co-worker, employer, friend, etc).

Comments about the applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Person Making Recommendation (print or type)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of Person Making Recommendation

\_\_\_\_\_

\_\_\_\_\_  
Telephone Number