



**SCHOOLS RENEWING THIRD QUARTER FOR
APPROVAL FROM OCTOBER 1, 2023 THROUGH SEPTEMBER 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 **October 1, 2023 to September 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 **October 1, 2023 to September 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 **September 30, 2023** you do not have to provide the documentation in this renewal application. Instead, initial the statement that indicates no changes during **October 1, 2022 through September 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 October 1, 2023 through September 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 October 1, 2022– September 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 October 1, 2023 to September 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 **2019** 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 2020-2021 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 2020-2021 renewal application or a 2020-2021 application for an original certificate of approval:

_____ B. Organizational chart

_____ C. Instructional staff

I, the undersigned, affirm that the preceding information regarding no changes since the 2020-2021 renewal application or the 2020-2021 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** THIRD 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 _____ACCSCCT _____ACCET _____Other

_____School is not nationally accredited

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ATTACHMENT J

ENROLLMENT FIGURES

October 1, 2022 through September 30, 2023

Name of School: _____

Students enrolled from Delaware: _____

Students enrolled from out-of-Delaware: _____

Total student enrolment: _____

OUT OF STATE SCHOOLS ONLY LIST 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 Third Quarter Renewal for October 1, 2023 through September 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: 2023-2024 Third Quarter Renewal for October 1, 2023 through September 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