|  |  |  |  |
| --- | --- | --- | --- |
| **State Use Only** | | | |
| Ck #: | \_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_\_ |
| Amt: | $\_\_\_\_\_\_\_ | Appl: | $\_\_\_\_\_\_\_ |
| PS: | \_\_\_\_\_\_\_\_ | Final: | \_\_\_\_\_\_\_\_ |

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**RENEWAL APPLICATION FOR OUT-OF-STATE COLORADO PRIVATE OCCUPATIONAL SCHOOL**

**Must be typed.** Refer to [fee schedule](https://highered.colorado.gov/fee-schedule) for fees.

**Note to Applicants:** Renewal Applications must be completed electronically, printed, notarized, and submitted to the Division with full payment via mail or hand delivery. Handwritten applications will not be accepted. Please refer to the [Renewal FAQs](https://highered.colorado.gov/school-forms) for assistance in completing this application.

**PLEASE NOTE:** The Division of Private Occupational Schools is not required to act upon any application until all materials constituting an application have been submitted.

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| --- | --- | --- | --- | --- | --- | --- |
| **SECTION ONE - DEMOGRAPHICS** | | | | | | |
| **School Information** | | | | | | |
|  | | | | | | |
| **Official Name of School**: | | | | | | **Date**: MM/DD/YYYY |
| **Physical Address**: Street, City, State, Zip | | | | | | |
| **Mailing Address**: Street, City, State, Zip | | | | | | |
| **Primary Phone**: | | | | **Alternate Phone**: | | |
| **School Email**: | | | | | | |
| **School Website**: | | | | | | |
|  | | | | | | |
| **School Contact Information** | | | | | | |
|  | | | | | | |
| 1. **Person Submitting Application**: | | | | | **Title**: | |
| **Phone Number**: | **Email**: | | | | | |
|  | | | | | | |
| **School Director** (if different from above): | | | | | | |
| **Phone Number**: | **Email**: | | | | | |
|  | | | | | | |
| 1. **Primary School Contact**: | | | | | **Title**: | |
| **Phone Number**: | **Email**: | | | | | |
|  | | | | | | |
| 1. **Designated Agent**\*: | | | | | | |
| **Address**: Street, City, State, Zip | | | | | | |
| **Phone Number**: | Email: | | | | | |
| \*Name and Colorado address of Designated Agent upon whom any process, notice or demand may be served. This address must be separate than that of the school. | | | | | | |
|  | | | | | | |
| **Type of Business (Select One)** | | | | | | |
|  | | | | | | |
| **Sole Proprietorship** | | **Individual’s Name**: | | | | |
| **Partnership** | | **Partnership Name**: | | | | |
| **Corporation** | | **Corporation Name**: | | | | |
| **Limited Liability Company (LLC)** | | **LLC Name**: | | | | |
| Business contact information (as registered with the Colorado Secretary of State): | | | | | | |
| **Street Address**: Street, City, State, Zip | | | | | | |
| **Phone Number**: | | | **Email**: | | | |
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| **SECTION ONE – DEMOGRAPHICS (Cont’d.)** | | | |
| List the name, home address, phone number, title of each partner/owner/corporate officer and/or member/stockholder having controlling interest in the school: (If more space is needed, attach a separate sheet.) | | | |
| **1**. **Name**: | | **Title**: | |
| **Home Address**: Street, City, State, Zip | | | **Phone Number**: |
|  | | | |
| **2. Name**: | | **Title**: | |
| **Home Address**: Street, City, State, Zip | | | **Phone Number**: |
|  | | | |
| **3. Name**: | | **Title**: | |
| **Home Address**: Street, City, State, Zip | | | **Phone Number**: |
|  | | | |
| **4. Name**: | | **Title**: | |
| **Home Address**: Street, City, State, Zip | | | **Phone Number**: |
|  | | | |
| **5. Name**: | | **Title**: | |
| **Home Address**: Street, City, State, Zip | | | **Phone Number**: |
|  | | | |
| **6. Name**: | | **Title**: | |
| **Home Address**: Street, City, State, Zip | | | **Phone Number**: |
| **SECTION TWO – AGENT INFORMATION** | | | |
| **Total number of Agents renewing and/or being added with this application:** | | | |
|  | | | |
| **Renewing Agent(s):** (Agents that have already been issued permits. If more space is needed, attach a separate sheet.) | | | |
| 1. First, Last | 1. First, Last | | |
| 1. First, Last | 1. First, Last | | |
| 1. First, Last | 1. First, Last | | |
| 1. First, Last | 1. First, Last | | |
|  | | | |
| **New Agent(s):** (Agents that have NOT previously been issued permits. If more space is needed, attach a separate sheet.) | | | |
| 1. First, Last | 1. First, Last | | |
| 1. First, Last | 1. First, Last | | |
| 1. First, Last | 1. First, Last | | |
| 1. First, Last | 1. First, Last | | |
| **SECTION THREE – SURETY INFORMATION** | | | |
| Surety Bond Holder: | | | |
| Bond Number: | | | |
| **SECTION FOUR – ADDITIONAL SCHOOL INFORMATION** | | | |
| **Home State Authorization** | | | |
|  | | | |
| List the name(s) of all agencies relating to the school’s authorization to operate in its home state: | | | |
| **1. Name**: | | | |
| **Address**: Street, City, State, Zip | | | |
| **2. Name**: | | | |
| **Address**: Street, City, State, Zip | | | |
| **Accredited Schools Only** | | | |
| **Name of accrediting organization**: | | | |
|  | | | |

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| **SECTION FIVE – REQUIRED DISCLOSURES** | | | |
| If any question below is answered “yes”, attach a written explanation of your answer. If this information has not been submitted to the Division with a previous application, include official court documentation which outlines the date and circumstances surrounding the case including, if applicable, charges and disposition of the court case which demonstrates completion of any probation or court ordered terms. (**Please note:** failure to accurately report criminal history may be grounds for immediate board action including but not limited to revocation of agent permits or certificate to operate as a private occupational school.) | | |
|  | | |
| In the past year, has any principal owner(s), officer(s) or any person in a management capacity: | | |
| 1. Been denied operation of a school in Colorado? | Yes | No |
| 1. Been denied operation of a school in any other state? | Yes | No |
| 1. Been part of a school that closed or was otherwise required to cease operation in any other state as part of a disciplinary or legal action? | Yes | No |
| 1. Been involved in a bankruptcy? | Yes | No |
| 1. Been convicted of or pled guilty to a felony, or are charges pending? | Yes | No |
| 1. Been convicted of or pled guilty to a misdemeanor other than a minor traffic violation, or are misdemeanor charges pending? | Yes | No |
| 1. Been dismissed or allowed to resign from any position for immoral or unprofessional conduct? | Yes | No |
| 1. Had a professional license or permit disciplined, denied, revoked, or relinquished in Colorado or any other state? | Yes | No |
| 1. Ever been disciplined by any governmental regulatory body or professional association in Colorado or any other state? | Yes | No |
| **SECTION SIX - AFFIDAVIT** | | |
| Application is hereby made to solicit, recruit, and enroll students in the state of Colorado in conformity with the provisions of the [Private Occupational Education Act of 1981](https://highered.colorado.gov/laws-regulations), and the [Rules and Regulations](https://highered.colorado.gov/laws-regulations) promulgated pursuant to the Act. It is understood that the Division of Private Occupational Schools, upon review and evaluation of this application, may require further information to be submitted and shall conduct such investigation and appraisal as it deems necessary and appropriate prior to Board approval. | | |
|  | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly sworn, deposes and attests that each of the statements in this  (Printed name of School Officer or Principal Owner)  application and all items included as a part of this application are true and correct to the best of my knowledge.  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
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**CHECKLIST FOR OUT-OF-STATE RENEWAL APPLICATION**

The following documents, as applicable, must be attached to this application before it will be reviewed by Division staff and forwarded to the Board for consideration. Please refer to the [Renewal FAQ’s](https://highered.colorado.gov/school-forms) for assistance in completing this application.

**REQUIRED Application Attachments:**

|  |  |  |
| --- | --- | --- |
| **SECTION ONE – DEMOGRAPHICS** | |  |
| **APPLICATION FEE** - See [Fee Schedule](https://highered.colorado.gov/fee-schedule) for required Renewal fee. | | Yes |
| **SECTION TWO – AGENT INFORMATION** | |  |
| **Please Note:** An agent permit is required for ALL individuals who represent the school in recruiting students. **Only the approved Agent is authorized to sign an Enrollment Agreement as the school’s licensed agent**. In most cases, the school’s Agents must renew on the same cycle as the school’s renewal of their Certificate of Approval (COA).   * Agent Fee(s) (see [Fee Schedule](https://highered.colorado.gov/fee-schedule) for required Agent fee). * Agent Application(s) including court documentation, if applicable. | | Yes  Yes |
| **SECTION THREE – SURETY INFORMATION** |  | |
| * Documentation of the properly executed surety bond in the amount of $50,000.00 verifying current coverage. | Yes | |
| **SECTION FOUR – ADDITIONAL SCHOOL INFORMATION** |  | |
| **Home State/Accreditation Information:**   * Copies of all documents verifying the school’s authorization to operate in its home state. * Copies of all documents verifying accreditations or other approvals.   **Media/Advertising:**   * Copy of the school’s [Catalog](https://highered.colorado.gov/school-forms). * [Catalog Checklist](https://highered.colorado.gov/school-forms). * Copy of the school’s [Enrollment Agreement](https://highered.colorado.gov/school-forms). * [Enrollment Agreement Checklist](https://highered.colorado.gov/school-forms). * Draft copies of all media advertising and other promotional literature intended for use in Colorado, which include the school name, address, telephone number, and location where training will be offered. | Yes  Yes  Yes  Yes  Yes  Yes  Yes  N/A | |
| **SECTION FIVE – REQUIRED DISCLOSURES** |  | |
| * Documentation provided for explanations to “Yes” answers in this section. (Refer to Application Section Five.) | Yes  N/A | |
| **SECTION SIX - AFFIDAVIT** | | |
| * Signature of School Officer or Principal Owner. | Yes | |
|  | | |