STATE OF NEBRASKA

COORDINATING COMMISSION FOR POSTSECONDARY EDUCATION

*This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.*

# APPLICATION FOR A RECURRENT AUTHORIZATION TO OPERATE A POSTSECONDARY INSTITUTION IN NEBRASKA

**For Institutions Applying to Offer One or More Courses or Programs**

## Procedures for Submitting the Application

1. Send the application form and all supporting materials to:

Executive Director

Coordinating Commission for Postsecondary Education

P.O. Box 95005

Lincoln, NE 68509-5005

OR

Submit the application via email to Kathleen Fimple at:

Kathleen.fimple@nebraska.gov with the fee sent by U.S. mail.

1. A non-refundable [application fee](https://ccpe.nebraska.gov/sites/ccpe.nebraska.gov/files/Fee%20Schedule.pdf) for the Commission’s administrative costs shall be submitted with each application. Make checks payable to “Coordinating Commission for Postsecondary Education.”
2. All sections shall be clearly marked for easy location by the reviewer.
3. The Commission may request additional information deemed necessary for an appropriate determination of compliance with the evaluation criteria.

STATE OF NEBRASKA

COORDINATING COMMISSION FOR POSTSECONDARY EDUCATION

# APPLICATION FOR A RECURRENT AUTHORIZATION TO OPERATE A POSTSECONDARY INSTITUTION IN NEBRASKA

**For Institutions Applying to Offer One or More Courses or Programs**

|  |  |
| --- | --- |
|   **Date:** |    |
| **Name of Institution:** |     |
| **Street Address:** |    |
| **City/State/Zip Code:** |    |
| **Name of Owner of Institution:** |    |
| **Owner’s Mailing Address (if different from above):** |  |
| **Name of Contact person:** |  |
| **Title:** |  |
| **Telephone Number:** |    |
| **Fax Number:** |    |
| **E-mail Address:** |    |
| **Web Site for Institution:** |  |
|  |  |
| **Proposed location in Nebraska:** |  |
| **Will this be a new campus (owned by the institution or under long-term lease)** |  yes  no |
|  |  |
| **Proposed offerings:**(please provide a copy of the institutional catalog) |  Course/s only (list courses below)  Program/s |
| **Course/s:**(if not offering a program) |  |
|  |  |
| **Programs to be offered and Awards to be conferred:**  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Legal Status of the Institution:** |  |

a.    Nonprofit (please provide documents of incorporation, and if available

 §501(c)(3) status documentation, that provide business name and address;

 names, titles, and business addresses of all principals in the business)

1.  For-profit (please provide documents of incorporation or other legal documents

 that provide business name and address; names, titles, and business

 addresses of all principals in the business)

         Is ownership:       proprietorship,   partnership,    corporation?

 Has the business, a principal officer in the business, or a shareholder

 with 25% or more ownership interest in the business filed for bankruptcy

 during the preceding five years?  yes  no

**Please provide the following information in a narrative format. Include copies of pertinent documents where appropriate.**

**Each numbered, italicized item is a standard identified in state statute. Statutes charge the institution to “demonstrate that it can be maintained and operated in accordance with such standards.” (Neb. Rev. Stat. §85-2406) Each bulleted item should be addressed. Additional information under each numbered item may be included as appropriate to the application.**

**Institutions applying to offer courses only (not a complete degree program) need only respond to starred (\*) items.**

1. *The financial soundness of the institution and its capability to fulfill its proposed commitments and sustain its operations*
* The most recent audited financial statements and a copy of the management

letter\*

* Tuition and fees for the most recent academic year or term\*
* Proposed annual budget identifying all sources of income and all categories of educational and general expenditures for the programs in Nebraska
* Explanation of how the interests of students will be protected if the institution were to discontinue its offerings in Nebraska
* Student loan default rate and financial responsibility composite score from the U.S. Department of Education (if applicable)
1. *The quality and adequacy of teaching faculty, library services, and support services*
* Number of faculty teaching in the program/s (course/s\*)
* Qualifications of each faculty member (vitae, resume, or other biographical

information)\*

* Library and learning resources\*
* Written agreements with local libraries regarding shared resources
* Agreements with online libraries or data sources
* Support services for students such as academic or career advising\*
1. *The quality of the programs offered, including courses, programs of instruction, degrees, any necessary clinical placements, and the institution’s ability to generate and sustain enrollment*
* Curriculum description/s including a list of required and optional courses
* Course descriptions\*
* Any licensure or certification requirements for the field/s and the way in which the institution will meet them
* Instructional equipment, especially that required for specific programs\*
* Assurance that the institution will be able to secure clinical placements for students in programs that require them
* Estimated enrollments and the basis for the estimate\*
* Comparison of the program (or course/s\*) with that offered on the main campus or other campuses of the institution (if applicable)
* Relationship between the hours of instruction and the credits awarded\*
1. *The specific locations where programs will be offered or planned locations and a demonstration that facilities are adequate at the locations for the programs to be offered*
* Description of the facility (include a floor plan if this is a new campus)\*
* Copies of leases or facility use agreements\*
1. *Assurances regarding transfer of credits earned in the program to the main campus of such institution* [if applicable] *and clear and accurate representations about the transferability of credits to other institutions located in Nebraska and elsewhere*
* Any articulation agreements with Nebraska postsecondary institutions\*
* Any other affiliations with Nebraska postsecondary institutions regarding the transfer of credits, joint use of faculty or facilities, or other supportive relationships\*
1. *Whether such institution and, when appropriate, the programs, are fully accredited, or seeking accreditation, by an accrediting body recognized by the U.S. Department of Education*
* Name of the body that accredits the institution\*
* Status of institutional accreditation, including the date of the most recent

accreditation and any required reports or actions\*

* List of all programmatic accreditations related to the proposed program or courses\*
* Status of all programmatic accreditations, including the date of the most recent

accreditation and any required reports or actions\*

1. *The institution’s policies and procedures related to students, including, but not limited to, recruiting and admissions practices*
* Admission requirements for the institution and programs (if different)\*
* Anticipated methods of recruiting students in Nebraska\*
* Loan procedures
1. *The tuition refund policy for an institution that does not participate in federal financial aid programs described in Title IV of the federal Higher Education Act of 1965 as such act existed on January 1, 2011*
* Copy of the Title IV Program Participation Agreement with the US Department

of Education (for institutions participating in federal financial aid programs) or a copy of the tuition refund policy if not participating in Title IV\*