

DOCUMENT RECEIPT AND CONTROL CENTER

*Eligibility Applications
User's Guide*

March 18, 1999

OUTLINE

Eligibility System

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 - Source Documents*
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Background

Requirement

The Higher Education Act of 1965 (HEA) and Higher Education Amendments of 1992 and 1993 require that the institutions' Program Participation Agreements (PPAs) will expire in accordance with the schedule developed by the U.S. Department of Education. The PPAs allow institutions to participate in Federal Student Financial Assistance Programs authorized by the Title IV of the HEA. The schools that wish to continue must reapply, be reevaluated by the Secretary of Education, meet the eligibility requirements, and receive a new PPA, which will expire within four years from the issue date. These institutions must reapply before their PPA expires if they wish to continue Title IV without interruption.

Purpose

The purpose of the Document Receipt and Control Center (DRCC) is to act as a screening and tracking mechanism process for institutions applying for recertification of participation in Title IV funding. Institutions which currently hold PPAs are divided by risk level into various timeline groups with application due dates. Foreign schools as well as domestic schools are required to follow the same process. There are also many events that occur in institutions which may effect their eligibility and require institutions to update their application information (See section 3. Non recertifications). DRCC is responsible for obtaining the application, analyzing the package, documenting the results and sending it on to the appropriate group within the Department of Education.

Information for each individual institution such as OPE ID number, EIN number, school name and address is downloaded into the appropriate Lotus Notes database from the Department of Education's PEPS. This information will be downloaded and will automatically appear on the screen when a particular school is selected and the data entry screen is opened.

Definitions

Following is a list of definitions and their acronyms which should assist the user in understanding the instructions in this manual.

DRCC

Document Receipt and Control Center. The DRCC is an area where recertification applications, financial statements and compliance audits are received from participating institutions and reviewed by fundamental analysis.

SFAP

Student Financial Assistance Programs. Federal programs which enable the students to receive Title IV funding and pursue educational goals.

PEPS

Postsecondary Education Participants System. PEPS provides a profile of the institution by capturing elements and information about the school's eligibility.

Detailed School Report

Report developed by the Institutional Participation Oversight Service used to help in the performance of *Second Cut Editing* (See 2-5).

OPE ID

Office of Postsecondary Education (a division of the U.S. Department of Education) Identification Number for participating institutions.

IPOS

Institutional Participation Oversight Service is a department within the Office of Postsecondary Education.

HEA

Higher Education Act.

PPA

Program Participation Agreement between the Department of Education and the eligible institution.

IDS Management Report

This provides a profile report which is used for audit, funding, administrative action, default rates and other than Department of Education reviews.

FMS

Financial Management Services (part of the U.S. Department of Education).

EDPMS

Education Program Management Services (part of the U.S. Department of Education).

PIP

Performance Improvement and Procedures Division of the U.S. Department of Education.

Cairo

The name of the database used for Financial Statement tracking and analysis in the DRCC. See the *Financial Statement Manual* for more information.

Determinates of Approval Process

The following are the determinates of the overall process to be completed for an institution to be approved for participation in Title IV funding.

- Completeness (prescreen) of the application
 - if complete send acknowledgment letter
 - if incomplete phone school or send incomplete letter
- Determine if eligible
 - accreditation
 - state authorization
 - eligible programs
- Determine if administratively capable
 - section K of the application
 - program reviews
 - compliance audits
 - default rates: Perkins & FFEL
- Determine if financially responsible
 - annual financial audits are reviewed
- Possible Outcomes
 - full approval: 4 year PPA
 - provisional: up to 3 year PPA
 - denial
- Final Projects
 - countersigned PPA
 - ECAR: Eligibility and Certification Approval Report

Source Documents

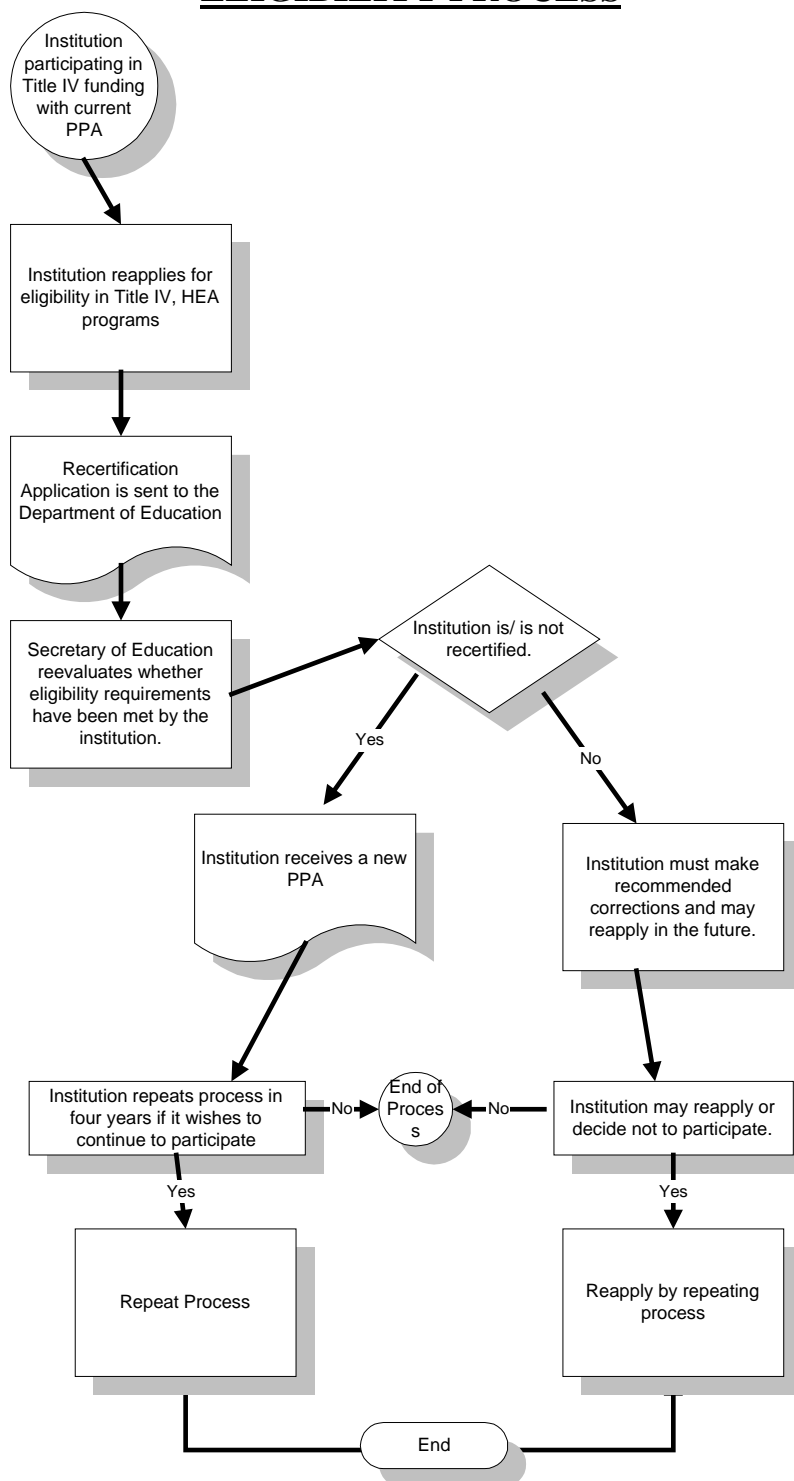
Below are documents which are needed to help evaluate institutions during the approval and recertification process. These documents are part of eligibility determination.

- PEPS Detailed School Report
- IDS Management Report
- Perkins Loan Default Book
- Parties Excluded from Federal Procurement & Nonprocurement Programs
 - Debarment Book
 - Debarment List on web
- FMS - Accounts Receivable Listings
 - Open Audit Receivable
 - Open Program Reviews
 - Open EDPMS Receivable

Process Flowchart

On the following page a flow chart is shown to illustrate the eligibility process an institute wishing to participate in Title IV funding would ensue.

ELIGIBILITY PROCESS



1.1 Getting Started with Lotus Notes

Chapter Outline

- **Definitions and Screen Features**
- **Lotus Notes Workspace Area**
- **Flowchart of Recertification Process**

Getting Started with Lotus Notes

Background

Lotus Notes can be described as a workgroup computing environment which helps people to work together regardless of time zone, operating system in use, main organization, or location. Notes contains tool bars and simple search mechanisms which make Lotus Notes a user friendly system. The following section contains instructions for the user of the databases located on the Lotus Notes system in the DRCC.

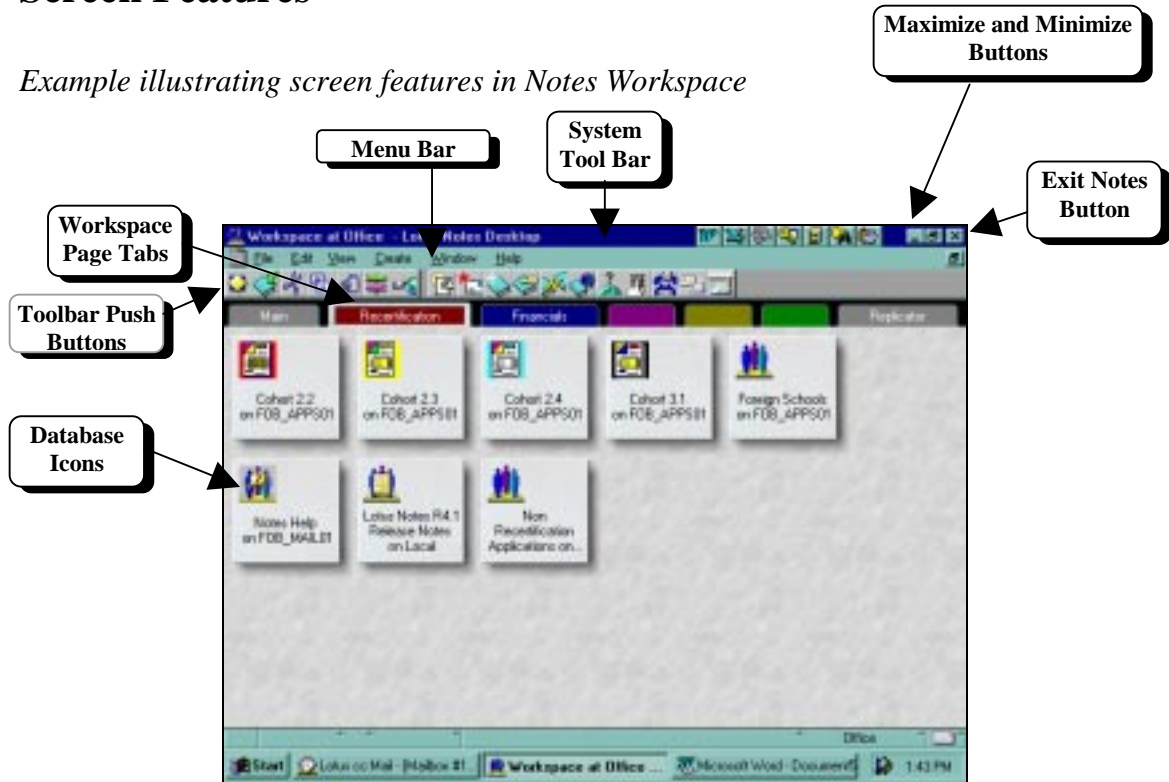
Objectives

- Become familiar with Lotus Notes
- Separate different types of applications
- Learn the terminology used in the DRCC
- Learn how to enter information into Recertification databases

Lotus Notes Workspace

Screen Features

Example illustrating screen features in Notes Workspace



System Tool Bar

The system tool bar indicates the name of the active window.

Menu Bar

The menu bar provides the menu actions you can select. The available menu actions are dependent on the current window.

Toolbar Push Buttons

The Toolbar offers a number of actions you can perform. For instance, you can save a file, print, or open a new database. You can learn a buttons function by holding the pointer over the button.

Workspace Page Tabs

By clicking on these tabs, you can go to another page of database icons.


Database Icons

Double clicking the database icon opens the actual database represented.

Getting Started

Step 1

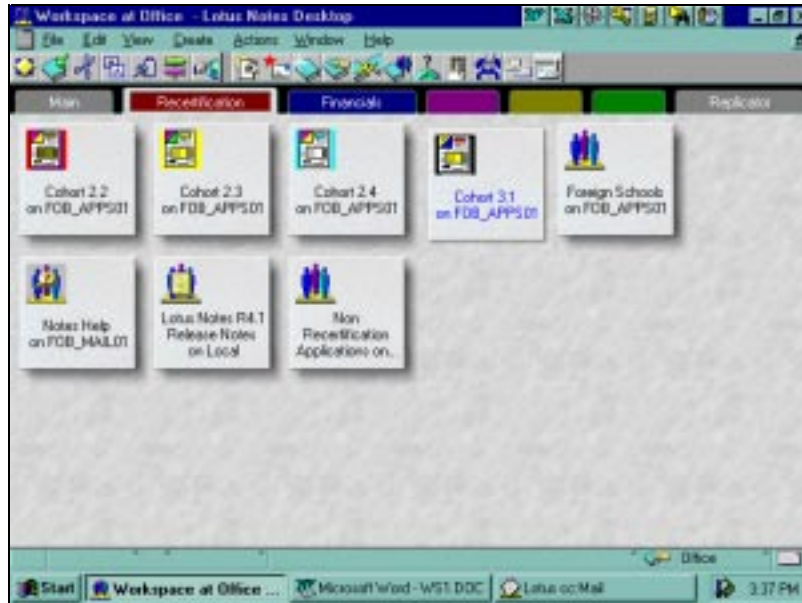
From Windows 95 click , <Lotus Applications>, and <Lotus Notes>. Another

option would be to double click on the Lotus Notes Icon  from the main screen.



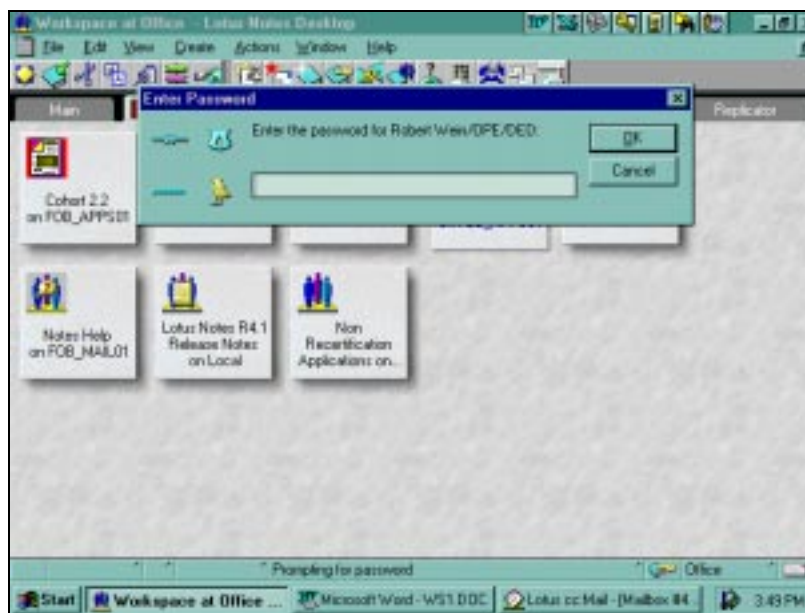
Step 2

Use mouse to place arrow (cursor) on Database icon you wish to open and double click the left mouse button.



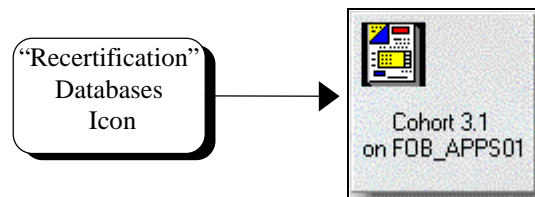
Step 3

A small screen will appear to prompt entry of your password. Passwords are five letters beginning with your last name and will continue with your first name, if your last name has fewer than five letters. Your password must be entered in capital letters.



Step 4

You should now be inside the selected database. Triangles on the outside of OPE ID# indicate additional documents for the institution exist and can be opened by selecting desired line. If a triangle is pointing sideways, it is hiding which documents exist on the database and their descriptions will not appear directly below the institution name. The left panel of the screen indicates possible types of views for the recertification screen. Below is an example of the database icon you will use for the most current Recertification database.



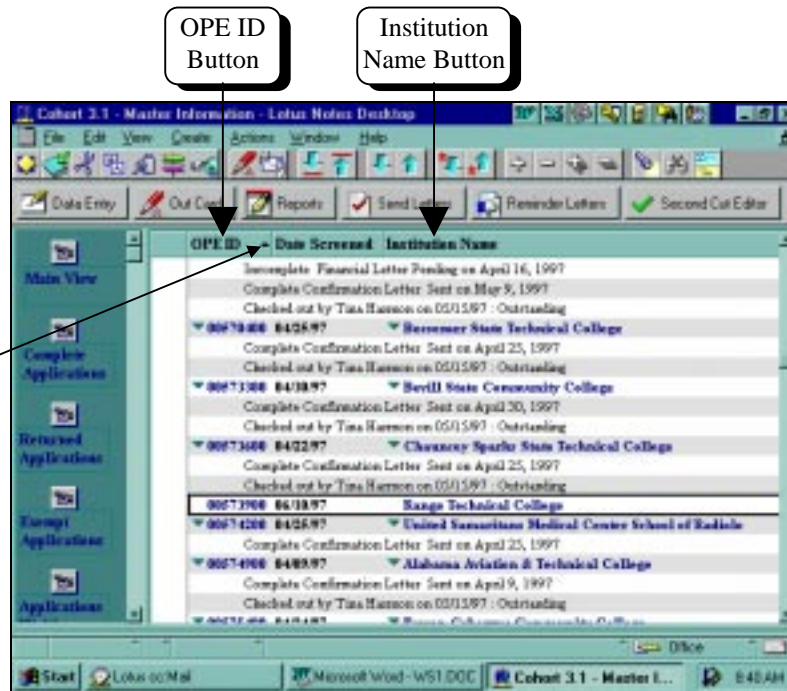
The screenshot shows the Lotus Notes Desktop application window titled "Cohort 3.1 - Master Information - Lotus Notes Desktop". The interface includes a menu bar (File, Edit, View, Create, Actions, Window, Help), a toolbar with icons for Data Entry, Out Card, Reports, Send Letters, Reminds Letters, and Second Out Editor, and a left-hand navigation pane with buttons for Main View, Complete Applications, Returned Applications, Export Applications, and Applications. The main display area shows a table with columns "OPE ID", "Date Screened", and "Institution Name". The table contains several rows of data, including entries for "Brenner State Technical College", "Beverly State Community College", "Chaucer Sparta State Technical College", "Range Technical College", "United Samaritan Medical Center School of Radiology", and "Alabama Aviation & Technical College". Annotations with callout boxes are present: one points to the "Main View" button in the left pane, stating "This screen is the Main View where Master Information is seen."; another points to the toolbar, stating "Bars describe actions which can be selected to perform."; and a third points to a triangle icon in the "OPE ID" column, stating "Triangles indicating additional documents."

Note: The view and action bars will be described further in sections relating to specific types of applications.

Step 5

Within the Database, you can search for the institution we wish to locate. There are two ways to do this:

- 1) To search by OPE ID #, click once on the OPE ID button and begin typing in the number. The triangle located on OPE ID button will be highlighted when you click on it, which activates this search method.
- 2) To search by the Institution Name, click once on the Institution Name button and begin typing the name of the institution. The triangle on the button will highlight and the same situation will occur as above. You may search by typing only the first part of the name. (Ex. for Podunk University type P-o-d-u)



Step 6

When you receive an application in the mail determine whether it is a:

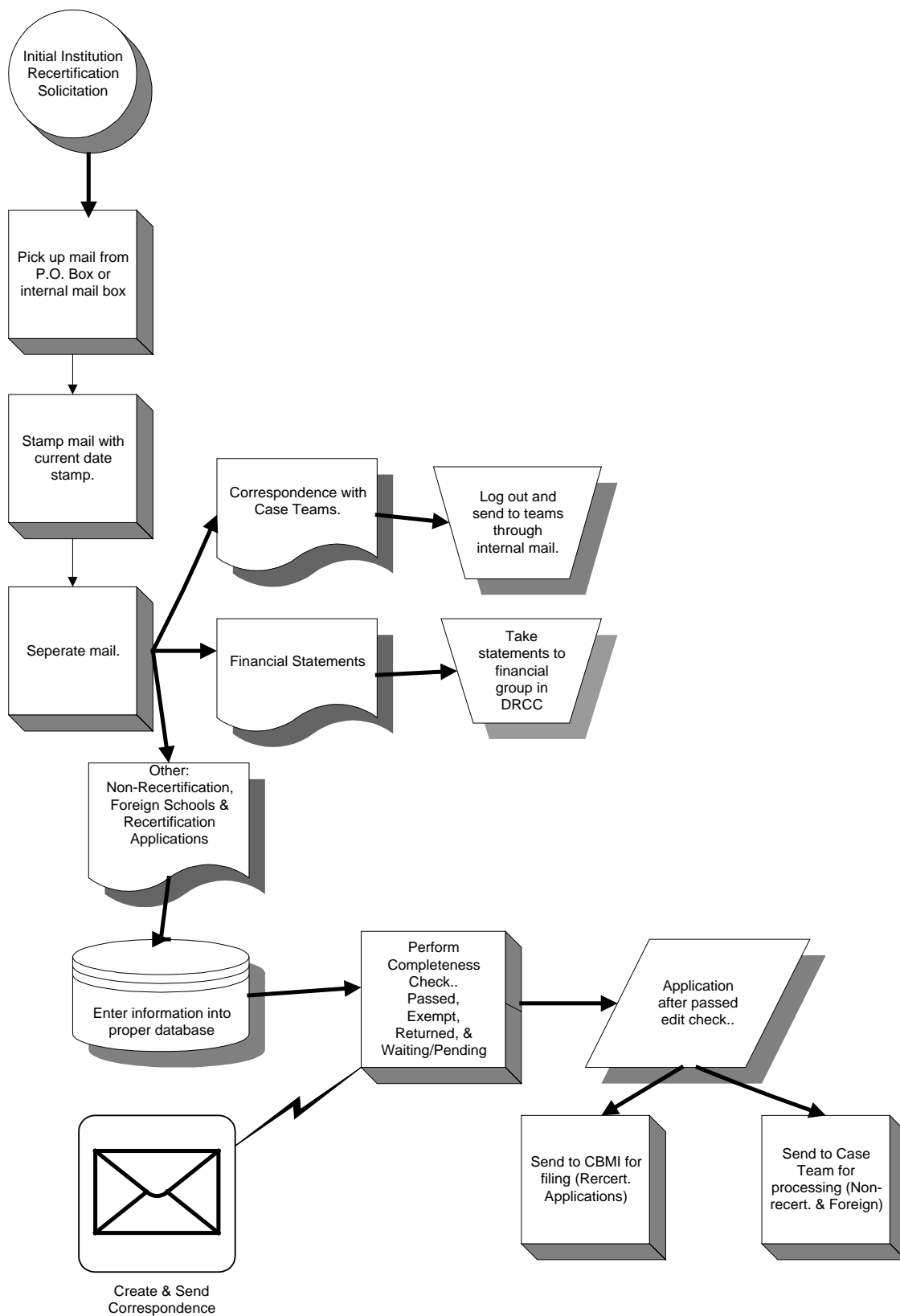
- **Recertification Application**
- **Foreign School-Recertification Application**
- **Non Recertification Application**

The first page of information in the application looks similar to this:

1. Tell us why you are submitting this application. (You may check more than one box.)	
<input type="checkbox"/>	Initial Certification. This is a request for initial approval to participate in federal student financial aid programs and to be initially designated as an eligible institution for other HEA programs.
<input type="checkbox"/>	Change in institutional ownership or structure. This is a request to participate in federal student financial aid programs and to be designated as an eligible institution for other HEA programs following a change in institutional ownership or structure.
<input type="checkbox"/>	Recertification. This is a request to continue to participate in federal student financial aid programs and to continue to be designated as an eligible institution for other HEA programs either in response to a recertification notice from us or because your institution's PPA will expire soon.
<input type="checkbox"/>	Designation as an eligible institution. This is a request to be designated as an eligible institution so that your students may receive deferments under federal student loan programs or so that your institution may apply to participate in federal HEA programs other than student financial aid programs.
<input type="checkbox"/>	Reinstatement. This is a request to be reinstated to participate in federal student financial aid programs and to be redesignated as an eligible institution for other HEA programs.
<input type="checkbox"/>	Other (specify) <input type="text"/>

For a recertification application , only the ☐ **Recertification** box will be marked. A foreign institution should be apparent by the address. If you are unsure whether the institution is foreign or domestic see Section C, question #18 on the application. The non recertification designation will cover any of the other selections. Once you have determined the proper category, go to appropriate section and follow the instructions.

RECERTIFICATION PROCESS



2.1 Recertification Applications

Chapter Outline

- **Background**
- **Objectives**
- **Completeness Check**
 - Screen Descriptions*
 - Application Analysis*
 - Determine Status*
- **Correspondence**
 - Requests for applications*
 - Confirmation letters*
 - Reminder letters*
 - Non respondent letters*
- **Second Cut Edits**
 - General*
 - Process*
 - Determine Priority*

Recertification Applications

Background

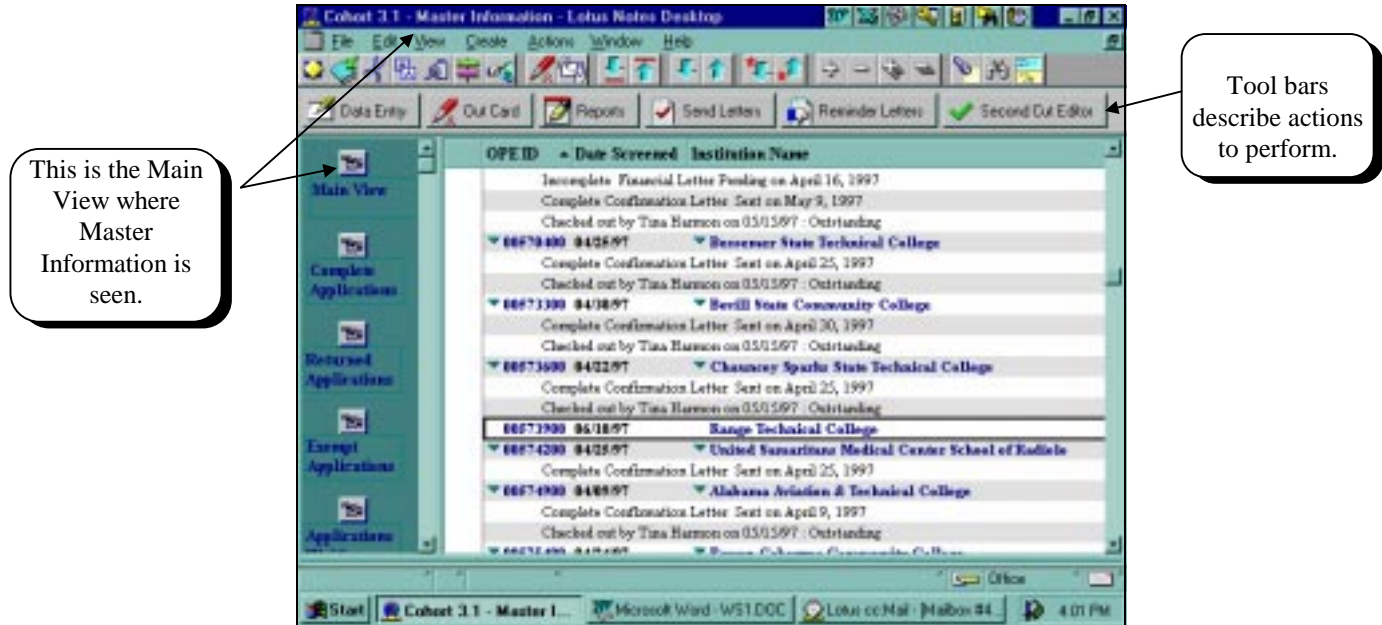
The heaviest volume of activity comes from institutions submitting applications for recertification of their Program Participation Agreements. These institutions are solicited for submission of applications by letters from the U.S. Department of Education according to PPA expiration date. A school can be fully certified up to four years or provisionally certified up to three years.

Objectives

This section will help you to:

- Access the correct database and institution record
- Enter the applicable information from the application package
- Analyze information which requires judgment

Example of Master Information Screen for Recertification Applications



Views

Main View

This screen gives the comprehensive and overall view of records located on the recertification database. Main view will show type of correspondence sent and whether an application has been checked out to an analyst.

Complete Applications

This displays the applications screened and classified as complete.

Returned Applications

Any rejected applications where letters are sent to the institutions indicating their rejected status will be presented in this view. This designation is for applications which contain some major deficiency.

Exempt Applications

Applications can only be deemed exempt by case teams or other appropriate Department of Education employees. Exempt status will prevent further correspondence regarding submission to comply with financial statement due date.

Applications Waiting on Fax/Pending

Applications missing a few items to be complete, may be classified by this status. Recertification analyst will contact the school by phone and request missing information. During this period a school will be placed on hold status until the information is received or a case team analyst determines to obtain the information themselves.

Actions

Data Entry

The Lotus Notes screen will automatically default to this option since the majority of work is done at this action.

Out Card

An out card records the transfer of a recertification application to a case team member for their review on a temporary basis. The out card will record to whom and when the application was checked out and when it was returned. This action is performed by the group in charge of maintaining the files for recertification applications.

Reports

This displays or prints the information which is relevant to the selected view.

Send Letters

Send Letters allows you to view pending letters according to status.

Reminder Letters

Correspondence dictated by PIP to remind schools which have not submitted their applications and the due date is rapidly approaching.

Second Cut Editor

This action is a more in depth analysis which is performed on schools when instructed by the Department and after receipt of Detailed School Report used for comparison.

Completeness Checks

- After completing Step 6 in **1.1 Getting Started with Lotus Notes**, double click the left mouse button on the highlighted line of text to open the appropriate form.

[Untitled] - Lotus Notes Desktop

File Edit View Create Actions Window Help

Ope Id: 00713000
Institution Name: Newberry Schools of Beauty

EIN Number: 954261663
Region: San Francisco
Institutional Control: Proprietary
Program Length:

Address1: 16828 Deschamps Blvd
Address2:
City, State, Zip: Granada Hills, CA 91344

Contact name:
Contact Title:
Contact Phone:

If extension enter extension date:

Start Lotus cc:Mail - [Mailbox #2] Microsoft Word - WS1.DOC [Untitled] - Lotus Net... 9:18 AM

The entire form of the screen shot above is presented on the following page.

Ope Id:	
Institution Name:	
Inc	
EIN Number:	
Region:	
Institutional Control:	
Program Length:	
Address1:	
Address2:	
City, State, Zip:	
Contact name:	
Contact Title:	
Contact Phone:	
If extension enter extension date:	
Is contact person at the same location?	<input type="radio"/> Yes <input type="radio"/> No
Is the accreditation letter attached?	<input type="radio"/> Yes <input type="radio"/> No
Valid state license/exemption with expiration on or before application deadline?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
IRS proof of 501 (c)(3) for private non-profit?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is Section E-e checked?	<input type="radio"/> Yes <input type="radio"/> No
Is Section E-g or E-h checked?	<input type="radio"/> Yes <input type="radio"/> No
Is E-i checked?	<input type="radio"/> Yes <input type="radio"/> No
Proof of ineligibility contract authorization?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Original signature?	<input type="radio"/> Yes <input type="radio"/> No
Sections A-M included?	<input type="radio"/> Yes <input type="radio"/> No
Is financial statement attached?	<input type="radio"/> Yes <input type="radio"/> No
Current status:	<input type="radio"/> Passed <input type="radio"/> Exempt <input type="radio"/> Returned <input type="radio"/> Waiting on Fax/Pending
Comments:	
Analyst Name:	
Date Received:	
Date Screened:	08/01/97
<input type="button" value="Save Changes"/> <input type="button" value="Generate Letter"/>	

Instructions for Questions in Completeness Checks for Recertification Applications

(Before you begin entering any data you must first double click on the form to open it.)

1. Section A

Verify the OPE and EIN Numbers. Check what is on the application with what has been entered on the form. If information is different fill out a data discrepancy form, **5.1 Miscellaneous Duties**.

2. Contact Information

The contact person information will be located on the application in Section A, Question 14, which is located on page 6 of the application. Fill in the name, title, and phone number as requested. When entering name information, place prefix in first set of brackets, first name and middle initial in second set, and last name in third set.

3. Extension

If an extension for completion of the application was given to the school, the individual who granted the extension will notify you. Only the Department can approve extensions. When extension is given, enter the new deadline date.

4. Contact Person Information

Check the address of the contact person with that of the school's address at the top of the screen. If the addresses are the same click 'Yes', if they are different click 'No'. If you click 'No', an additional field will be displayed asking for the address information. Fill in the address for the contact person. (This is the address for all correspondence concerning this application.) There are three spaces available for zip code. Enter the first five digits in

the first field, the dash in the second field, and the extension in the third field.

5. Accreditation Letter

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes.*’ If the letter does not meet any one standard click ‘*No.*’

6. State License

Question 17 of the application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If the letter is acceptable click ‘*N/A.*’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘*Yes.*’ If any of the criteria are not met, click ‘*No.*’

7. Non-profit Status

The documentation to support an institution’s non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation click ‘*Yes.*’ If it has not been included, click ‘*No.*’ If the institution does not require non-profit documentation, click ‘*N/A.*’

8. Section D

No data entry required. Be sure this section is filled out if the institution is classified as a proprietary institution.

9. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not, click 'No'. Clicking 'Yes' will prompt another question which asks if #27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if #27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not, click 'No.' Clicking 'Yes' will prompt another question which asks if #27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

8. Proof of Ineligibility Contract Authorization

If Question 28 is answered 'No' in the application click 'N/A.' If it is answered 'Yes' in the application, click 'Yes.' There should be an approval form if it is answered 'Yes.' If Question 28 is not answered, click 'No.'

9. Section F

Principal location and any additional locations should be listed in this section.

10. Section G

Questions 31 - 34 must be answered.

11. Sections H - J

Skip these sections for domestic institution recertifications.

12. Section K

All questions in this section must be answered 'Yes.' If a question is unanswered, the institution must provide an explanation in Question 69.

13. Original Signature

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature click on 'Yes.' if there is no signature, or it is not original, click on 'No.'

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

14. Sections A - M Included

Check the application to determine if all sections A through M have been included, and completed. If they all are present and completed click 'Yes.' If they are not all present click 'No'. Once you click on 'No' an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful, some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

15. Financial Statements

The financial statements for the institution may be included with the additional information sent with the application. If any financial statements are included, click on 'Yes.' If they are not, click on 'No.'

16. Current Status

-If all items are found and the application appears complete, click 'Passed.'

-If an application is unsatisfactory and you need to return it, select 'Returned.'

You should not return an application unless:

- you cannot reach the school by telephone or

- you have repeatedly requested information from the school, and they are not cooperating.

- If information is missing or incomplete you may select 'Waiting on Fax/Pending.' You should enter what is missing in the comments box.

-A school may also be marked 'Exempt.' For instance, if the institution is closed or is not due for recertification. List the reasons for exemption in the comments field.

17. Miscellaneous Information at Bottom of Form

- Type your name at the space next to 'Recertification Application Analyst Name'.

- Enter the stamped date that the application was received in the office where it asks for the 'Date Application was Received'.

- Enter the date that you worked on the application where it asks for 'Date of Rectification Screening'.

- In the 'Comments on Recert App' area type in any information that the case team should be aware of when looking at the school. This is also a good place for the analyst to note what may be missing from the application. For example, a comment may read

“Section G and Question 27 part b missing. These are being faxed.”

18. Create Confirmation Letter and Save Changes

When you are finished with all the questions for the school, proceed as follows:

If the Institution has ‘*Passed*,’ or you are returning the application for additional information, click on [Save Changes](#). Next, click on [Generate Letter](#). This will save the document and create a letter to send to the institution, informing them that the United States Department of Education has either received their application for approval to participate in Federal Student Financial Aid Programs or is returning the application because it is incomplete. An example of a confirmation letter is on the following page.

If the Institution is ‘*Waiting on Fax/Pending*’ or ‘*Exempt*,’ click on [Save Changes](#). **There is no letter to generate in this case.**



UNITED STATES DEPARTMENT OF EDUCATION

OFFICE OF POSTSECONDARY EDUCATION
INSTITUTIONAL PARTICIPATION AND OVERSIGHT SERVICE
WASHINGTON, DC 20202-5323

<<Mail Date>>

Office of Postsecondary Education No.: <<OPE ID#>>

<<Prefix>> <<FirstName>> <<LastName>>

<<Title>>

<<Institution_Name>>

<<Address1>>

<<Address2>>

<<City>>, <<State>> <<Zip>><<Dash>><<Four>>

Dear Officer:

This letter confirms the receipt of your institution's Application for Approval to Participate in Federal Student Financial Aid Programs. We are conducting a review, and as soon as our review is completed, we will advise you of our decision regarding your institution's status. <<Institution_Name>> is one of over <####> applicants; therefore, our review may take some time.

Thank you for your cooperation. You will be contacted by my office if additional information is required.

Sincerely,

Marianne R. Phelps
Director
Institutional Participation and Oversight
Service

19. Returning Applications

We return very few applications to institutions (approximately 3% in a year).

You may return the application if you have made more than three attempts to retrieve the information from the institution and they are uncooperative. Document your attempts on the comment line of the recertification analysis.

Make sure you generate an incomplete letter for the school and state why you are returning the application. You need to verify the correct PPA expiration date on the last page of the letter. Refer to the chart for PPA expiration dates based on the solicitation dates.

Give the institution's point of contact a courtesy call upon returning the application.

Recertification Applications

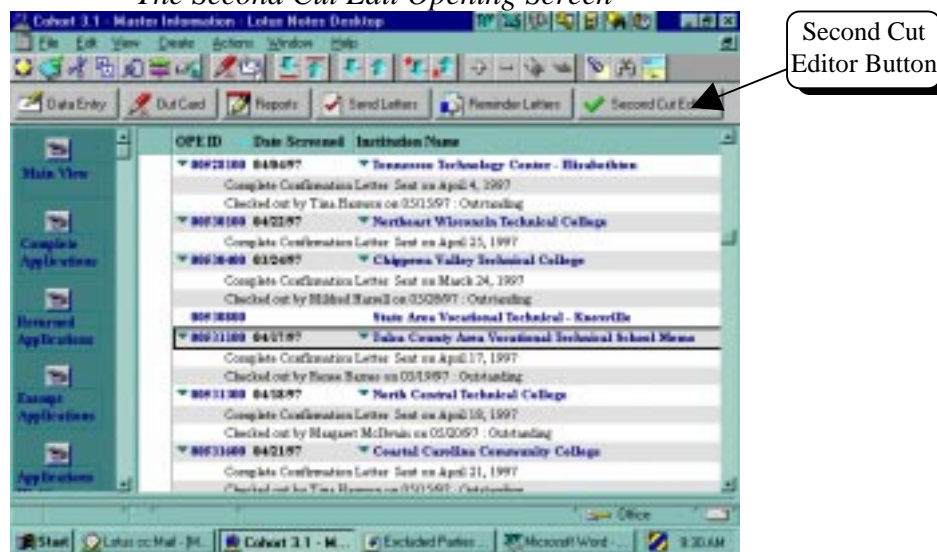
Second Cut Edits

General

-After the decision has been made to perform the *Second Cut Edits* analysis, the recertification applications which have been through the initial screening process are requested from CBMI (filing contractors) group. *Second Cut Edits* is a more in depth analysis of the recertification application made upon request by the Department of Education. Fill out relevant information on a spreadsheet and submit a copy to CBMI. It is recommended that these applications are tracked using a spreadsheet, because when these applications are checked out by CBMI they are your responsibility. The *Detailed School Report* should accompany the recertification applications. The Department will determine whether this report is generated by the DRCC or the Department. This report is used to compare information from PEPS to the information sent in by the institution.

-This process should be started from the Master Information screen. While the highlighted line of text is around the institution you wish to analyze, click the left mouse button on the *Second Cut Editor* button.

The Second Cut Edit Opening Screen



This is the entire form representing the *Second Cut Edits* analysis.

Op# Id: Institution Name:	
EIN Number: Region: Institutional Control:	
Address1: Address2: City, State, Zip:	
Data Edits	
From Current Institutional Report: Are there any administrative actions pending? <input type="text"/>	
Are there any program review liabilities?	<input type="text"/>
Are there any audit liabilities?	<input type="text"/>
Are there any other liabilities?	<input type="text"/>
94 FYEL rate	<input type="text"/>
95 FYEL rate	<input type="text"/>
92 FYEL rate	<input type="text"/>
Perk number	<input type="text"/>
Manual Edits	
SECTION A	
1) Does the EIN Number appear exactly as it does in PEPST?	<input type="radio"/> Yes <input type="radio"/> No
SECTION B	
2) Does the institution have an accreditation letter?	<input type="radio"/> Yes <input type="radio"/> No
3) Is the accrediting agency the same as listed in PEPST?	<input type="radio"/> Yes <input type="radio"/> No
4) Does the institution have state authorization?	<input type="radio"/> Yes <input type="radio"/> No
SECTION C	
5) Does the institution type appear exactly as it does in PEPST?	<input type="radio"/> Yes <input type="radio"/> No
SECTION D	
6) Is the owner(s) & ownership type listed in the application the same as in PEPST?	<input type="radio"/> Yes <input type="radio"/> No
7) Do any of the officials listed in the application appear in the Debarment Manual?	<input type="radio"/> Yes <input type="radio"/> No
8) Has Question 25 been answered "yes"?	<input type="radio"/> Yes <input type="radio"/> No
SECTION E	
9) Is the level of offering different than PEPST?	<input type="radio"/> Yes <input type="radio"/> No
SECTION F	
10) Does the institution name appear in the application exactly as it does in PEPST?	<input type="radio"/> Yes <input type="radio"/> No
11) Does the address appear in the application exactly as it does in PEPST?	<input type="radio"/> Yes <input type="radio"/> No
12) Is there an additional location?	<input type="radio"/> Yes <input type="radio"/> No
SECTION G	
13) Has the institution checked "yes" in section G?	<input type="radio"/> Yes <input type="radio"/> No
SECTION H	
14) Have all the questions in section E been answered "yes"?	<input type="radio"/> Yes <input type="radio"/> No
15) Is any information listed in question 69?	<input type="radio"/> Yes <input type="radio"/> No
16) Has IOPMO received the financial statements?	<input type="radio"/> Yes <input type="radio"/> No
Comments: <input type="text"/> Analyst Name: <input type="text"/> Date Screened: <input type="text"/>	
<input type="button" value="Save Changes"/> <input type="button" value="Create Electronic Worksheet"/>	

Instructions for Questions in Second Cut Edits for Recertification Applications

(Before you begin entering any data, you must first double click on the form to open it.)

1. Data Edits

Most of the Data Edits are already done. The first Data Edit which asks if there are any administrative actions pending is blank if there are none. If this is the case, insert a '0' into the blank. If there are administrative actions pending you do not have to do anything for the Data Edits, the amount will automatically appear .

2. Question 1

Compare the EIN number given in the application on Page 2, Question 6 with the EIN at the top of the *Second Cut Edit* form. If they are the same click 'Yes.' If they are different click 'No.'

3. Question 2

Check the attachments with the application to see if an accreditation letter is included. This letter must have valid dates. If a suitable letter is included, click 'Yes.' If a valid letter is not included, click 'No.'

4. Question 3

Compare the accreditation agency on the accreditation letter with the one listed in the Detailed School Report. If they are the same, click 'Yes.' If they are different, click 'No.'

5. Question 4

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If the letter is acceptable click 'Yes'. The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

6. Question 5

Compare the institution type at the top of the *Second Cut Edit* form with the institution type on Page 9, Question 18 of the application. If they are the same, click 'Yes.' If they are different, click 'No.'

7. Question 6

Compare the information listed in Section D of the application with the information provided on the Ownership page of the Detailed School Report. If the information is the same, click 'Yes.' If it is different, click 'No.'

8. Question 7

Go to the Debarment List. This can be found on-line at the following address:

www.arnet.gov:8000/epl/owa/epl_search.name_srch or
www.ed.gov and follow prompts

You will be prompted to give the name of the official. List the last name first followed by a comma and the first name. It is not necessary to list the entire name. For instance, if you wrote 'Bell, J' the search may come up with Jay Bell, John Bell etc. Or if you listed only the last name the search would return all people listed with that last name. Insert all officials listed in the application from Questions 10, 11, 12, 13, 14, 20, 21, 23, 24, 25, and 58. If any of the officials show up on the debarred list, click 'Yes.' If none of the officials are listed, click 'No.'

9. Question 8

If Question 25 of the application has been answered "Yes", click 'Yes.' If it is answered "No", click 'No.'

10. Question 9

The first page of the Detailed School Report lists the program length in PEPS. Compare this with the program length in the application. Use the chart titled **Non-Degree Program Lengths by Type (in PEPS)** included with this manual to compare weeks and clock hours for non degree programs. If the highest level of offering listed by the application is different than the Detailed School Report, click 'Yes.' If the two highest level of offerings are the same, click 'No.'

11. Question 10

Compare Section F, Question 29 of the application with the first page of the Detailed School Report. If the institution names are the same, click 'Yes.' If they are different, click 'No.'

12. Question 11

Compare Section F, Question 29 of the application with the first page of the Detailed School Report. If the institution addresses are the same, click 'Yes.' If they are different, click 'No.'

13. Question 12

Compare Section F of the application with the page of the Detailed School Report titled Additional Locations. If either lists an additional location, click 'Yes.' If neither lists additional locations, click 'No.' If you click 'Yes' you will be prompted to answer a couple more questions. You will be asked if the additional locations are the same. You will also be asked if the additional locations have state authorization. If the additional locations are in the same state as the main location *they do have* state authorization. If they are in different states, the school must also include the new state licensure.

14. Question 13

If any question in Section G is answered "Yes", click 'Yes.' If none are answered "Yes", click 'No.'

15. Question 14

If all questions in Section K have been answered "Yes", click 'Yes.' If any questions are not answered "Yes", click 'No.'

16. Question 15

If any information is listed in Question 69, click 'Yes.' If there is nothing listed in Question 69, click 'No.'



17. Question 16

Check Cairo to see if the institution's financial statements have been received. The *Financial Statement Manual* can be used for instructions on searching for institutions. If the financial statements have been received, click 'Yes.' If they have not, click 'No.'

18. Analyst Name

Insert your name in this field.

19. Save Changes & Create Worksheet

Click  when you have completed all the questions. Next, click . You can print a copy of this to attach to the application. The Electronic Worksheet summarizes the findings from the *Second Cut Edit* and assigns a priority to the application. The possible status' are High, Medium and Low Priority.

The Electronic Worksheet form for *Second Cut Edits* is represented on the following page.

MODEL ELECTRONIC WORKSHEET FOR SECOND CUT EDITOR

OPE ID: 03110600
 Vocational-Technical School
 EIN#: 251214168
 Control: Public
 Cohort: 2.4

Institution: Admiral Peary Area
 948 Ben Franklin Highway
 Ebensburg, PA 15931

DATA EDITS

- ☐ Program Review Liabilities
- ☐ Audit Liabilities
- ☐ Other Liabilities
- ☐ Open Program Review
- ☐ Missing Audit(s)
- ☐ Pending Audit(s)
- ☐ High Default Rate
- ☐ Administrative Action

MANUAL EDITS

- ☒ State Authorization
- ☐ Accreditation Certification
- ☐ Owner(s) Discrepancy
- ☐ Name Discrepancy
- ☐ Address Discrepancy
- ☐ Additional Location Discrepancy
- ☐ Sec G: Yes Answer
- ☐ Debarment Schedule

- ☐ Pending Audit(s)
- ☐ High Default Rate
- ☐ Administrative Action

- ☐ Additional Location Discrepancy
- ☐ Sec G: Yes Answer
- ☐ Debarment Schedule
- ☐ EIN Discrepancy
- ☐ Institutional Type
- ☐ Program Level Discrepancy
- ☐ Own Other School
- ☐ Financial Statements Not Received
- ☐ Section K has a No answer
- ☐ Additional Information in Question 69

- ☒ **High Priority**
- ☐ **Medium Priority**
- ☐ **Low Priority**

Please Note: Audit information was not available at the time this school underwent the second cut editing process. Therefore, it is necessary for the normal audit research to be conducted by the team.

DRCC

3.1 Non-Recertification Applications Chapter Outline

- **Background**
- **Objectives**
- **Twenty-three update options**
- **Correspondence**

3.1 Non-Recertification Applications

Background

Non recertifications will include any application received that in section A page 1 is marked one of the following:

- Initial Certification
- Change in Institutional Ownership or Structure
- Designation as an Eligible Institution
- Reinstatement
- Other

You may also receive an application that is marked Recertification but is not located in your database under any Cohort. This is a *Recertification without Cohort*.

Requests for changes included in this database may be made without a complete application. If questions on the application are required to be answered you may call the institution and mail out an application in order for them to return the applicable sections. Sections may also be faxed, however Section L with original signature must always be provided through the mail to maintain the original signature. An institution may request more than one type of change in the cover letter. Create a database record for every situation where appropriate. After information is entered in the database and status is 'Passed', send package onto the proper case team, unless request is for:

- Initial Application
- Change of Ownership or Structure
- Reinstatement
- Convert to Non Profit
- Mergers
- Deferments or
- Branch to Freestanding.

These requests should be given to Institutional Participation Branch. An Initial Application can not be entered into the database and should be logged out on the Correspondence Log with proper information.

Objectives

This section will help you to:

- Access the correct non recertification database
- Enter the applicable information for the application package
- Analyze information which requires judgment

following is an example of the first section in application:

Section A. Please answer these general questions.

1. Tell us why you are submitting this application. (You may check more than one box.)

☐ **Initial Certification.** This is a request for initial approval to participate in federal student financial aid programs and to be initially designated as an eligible institution for other HEA programs.

☐ **Change in institutional ownership or structure.** This is a request to participate in federal student financial aid programs and to be designated as an eligible institution for other HEA programs following a change in institutional ownership or structure.

☐ **Recertification.** This is a request to continue to participate in federal student financial aid programs and to continue to be designated as an eligible institution for other HEA programs either in response to a recertification notice from us or because your institution's PPA will expire soon.

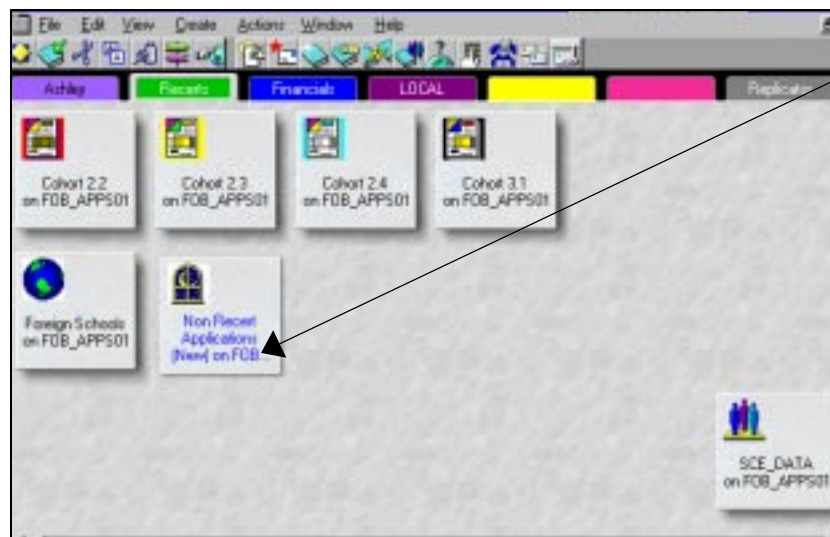
☐ **Designation as an eligible institution.** This is a request to be designated as an eligible institution so that your students may receive deferments under federal student loan programs or so that your institution may apply to participate in federal HEA programs other than student financial aid programs.

☐ **Reinstatement.** This is a request to be reinstated to participate in federal student financial aid programs and to be redesignated as an eligible institution for other HEA programs.


☐ **Other (specify)**

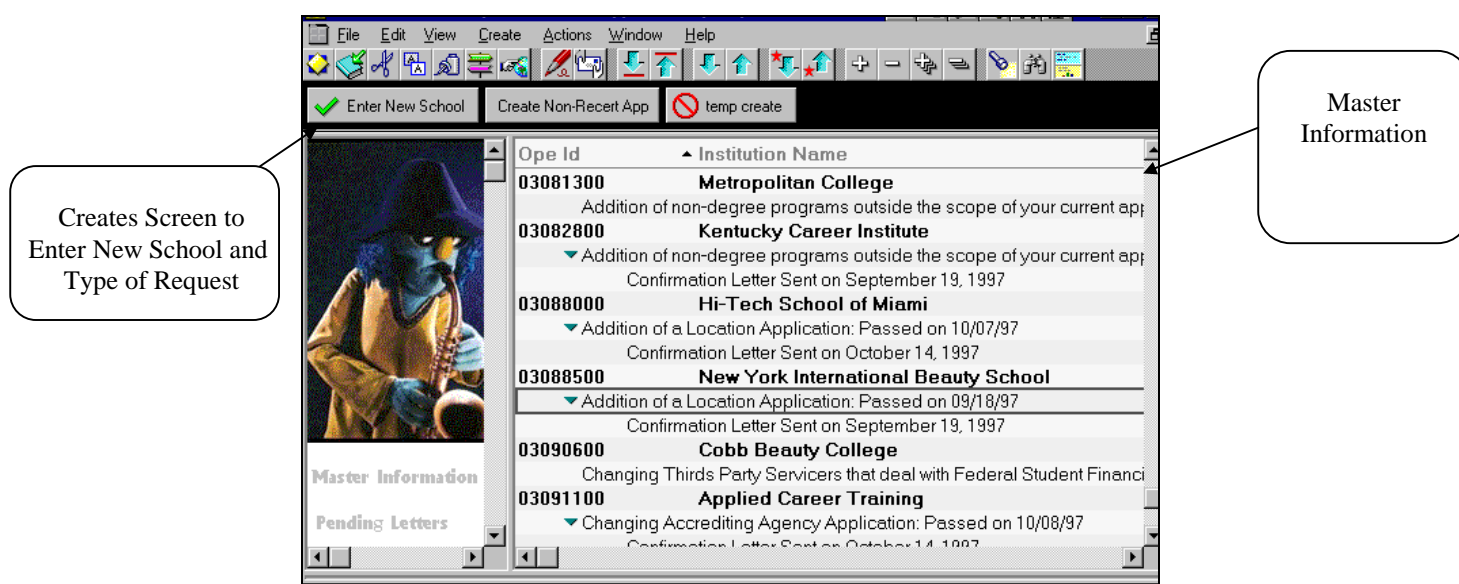
Access Database

Open the Non Recertification database by double clicking on icon. Master Information will appear on the workspace. This information includes OPE ID#, Institution Name and description of Non-Recertification application.



Information Entry

To enter a new Institution to the database, place mouse pointer on rectangle just below tool bar which reads  Enter New School and click. A workspace will open with a list of twenty-three options to choose from. First, enter the general information: OPE ID#, name, EIN number, region and mailing address at the top of your screen. Brackets will indicate where information is to be input.



Screen Shot

The following page is an example of the screen which appears after selecting to enter a new school. Use your mouse pointer to indicate which option applies to the application you are processing. If more than one option applies, indicate one and follow through the full process, then come back and select next option and complete the process again. After selection is made press the 'Esc' escape key and press enter to say 'yes' to save.

Non Recertification Application

OPE ID:

Institution Name:

EIN Number:

Forward To:

Address 1

Address 2

City, State Zip Code

Please choose from one of the following options:

- ☐ Recertification without cohort
- ☐ Initial application WITH prior history
- ☐ Initial application WITHOUT prior history
- ☐ Changing ownership or structure
- ☐ Changing ownership or structure
- ☐ Reinstatement
- ☐ Converting to Non Profit
- ☐ Merger
- ☐ Deferment
- ☐ Branch to Freestanding
- ☐ Changing Accrediting Agency
- ☐ Changing State Authorizing Agency
- ☐ Changing Educational Programs outside the scope of your current approval
- ☐ Addition of non-degree programs outside the scope of your current approval
- ☐ Changing from or to Clock or Credit hours
- ☐ Addition of a Location
- ☐ Changing Federal Student Financial Aid Programs for which you are approved
- ☐ Changing Name of the Institution
- ☐ Changing Name of CEO/President/Chancellor
- ☐ Changing Name of CEO/President/Chancellor
- ☐ Changing Name of Chief Fiscal Officer / Financial Officer
- ☐ Changing Principal Location-address only
- ☐ Changing Other Location-address only
- ☐ Changing Thirds Party Servicers that deal with Federal Student Financial Aid
- ☐ Changing Board of Directors

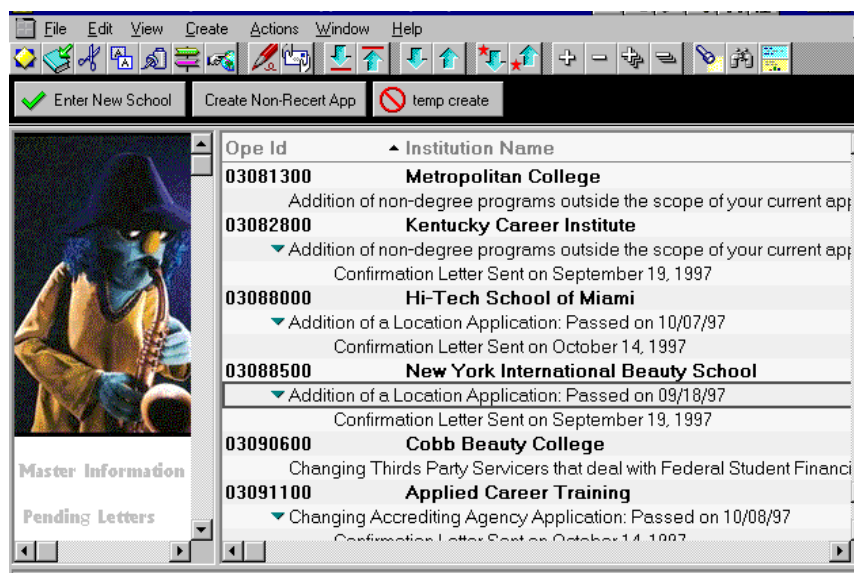
Analyze Information

Completion of the previous step will take you back to the Master Information workspace. Use your mouse or arrow keys to highlight the institution you are analyzing. Click your mouse button on the rectangle

Create Non-Recert App

just below the tool bar. This will create the appropriate analysis according to your selection when you

Enter New School



Following is an example of the analysis form for “Recertification without Cohort”

Recertification without cohort	
OPE ID:	<input type="text" value="99999999"/>
Institution Name:	<input type="text" value="Sample"/>
EIN Number:	<input type="text"/>
Region:	<input type="text"/>
Address 1:	<input type="text"/>
Address 2:	<input type="text"/>
City, State	<input type="text"/>
Zip:	<input type="text"/>
Contact Name:	<input type="text"/>
Contact Title:	<input type="text"/>
Contact Phone:	<input type="text"/>
Is contact person at same location? <input type="radio"/> Yes <input type="radio"/> No	
Is the accreditation letter attached? <input type="radio"/> Yes <input type="radio"/> No	
Valid state license/exemption with expiration at least three months after receipt?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
IRS Proof of 501 K (c)(3) for private non-profit?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is section E-e checked?	
Is 27a complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-g or E-h checked?	
Is 27b complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-i checked?	
Is 27c complete?	<input type="radio"/> Yes <input type="radio"/> No
Proof of ineligibility contract authorization?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Are sections A-M Included?	
	<input type="radio"/> Yes <input type="radio"/> No
Original Signature in Part L?	
	<input type="radio"/> Yes <input type="radio"/> No
Current Status: <input type="radio"/> Passed	
	<input type="radio"/> Exempt
	<input type="radio"/> Returned
	<input type="radio"/> Waiting on Fax / Pending
Comments: <input type="text"/>	
Analyst's Name: <input type="text"/>	
Date Received: <input type="text"/>	
Date Screened: <input type="text"/>	
<input type="button" value="Save and Print"/>	
<input type="button" value="Create Additional Sheet"/>	
<input type="button" value="Create Letter"/>	

Instructions for Questions regarding “Recertification without Cohort” Analysis

a. Section A

Verify the OPE and EIN Numbers. Check what is on the application with what has been entered on the form. If this is different, fill out a data discrepancy form (See section **5.1 Miscellaneous Duties**).

b. Contact Information

The contact person information will be located on the application in Section A, Question 14, which is located on page 6 of the pre-printed application. Fill in the name, title, and phone number as requested. When entering name information place prefix in first set of brackets, first name and middle initial in second set, and last name in third set.

c. Contact Person Location

Check the address of the contact person with that of the school’s address at the top of the screen. If the addresses are the same, click ‘Yes’, if they are different click ‘No’. If you click ‘No’, an additional field will be displayed asking for the address information. Fill in the address for the contact person. (This is the address for all correspondence concerning this application.) There are three spaces available for zip code information. Enter the first five digits, the dash, and the extension in the spaces provided.

**d. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click 'Yes.' If the letter does not meet any of the standards, click 'No.'

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable click 'N/A.' The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not, click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is, click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is, click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

i. Proof of Ineligibility Contract Authorization

If Question 28 is answered 'No' in the application, click 'N/A.' If it is answered 'Yes' in the application, click 'Yes.' There should be an approval form if it is answered 'Yes.' If Question 28 is not answered, click 'No.'

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34, regarding telecommunications and/or correspondence must be answered.

l. Sections H - J

Skip these sections unless applicable.

m. Section K

All questions in this section must be answered 'Yes.' If a question is answered 'No', the institution must provide an explanation in Question 69.

**n. Section A-M
Included**

Check the application to determine if all sections A through M have been included and completed. If they all are present and completed, click 'Yes.' If they are not all present, click 'No'. Once you click on 'No' an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**o. Original
Signature**

Check to see if Section L, on page 38 of the application, has a signature that is original. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original click on 'No.'

**o. Original
Signature
Cont'd**

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

p. Current Status

- If all items are found and the application appears complete, click '*Forwarded.*'
- If an application is unsatisfactory and you need to return it, select '*Returned.*' You should not return an application unless:
 - you cannot reach the school by telephone or
 - you have repeatedly requested information from the school, and they are not cooperating.
- If information is missing or incomplete you may select '*Waiting on Fax/Pending.*' You should enter what is missing in the comments box.
- A school may also be marked '*Exempt.*' For instance, if the institution is closed or is not due for recertification. List the reasons for exemption in the comments field

**q. Miscellaneous
Information
at Bottom of
Form**

- Type in your name where it asks for the '*Recertification Application Analyst Name*'.
- Enter the stamped date that the application was received in the office where it asks for the '*Date Application was Received*'.
- Enter the date that you worked on the application where it asks for '*Date of Recertification Screening*'.
- In the '*Comments on Recert App*' area type in any information that the case team should be aware of when looking at the school. This is also a good place for the analyst to note what may be missing from the application. For example, a comment may read "Section G and Question 27 part b missing. These are being faxed."

**r. Create
Confirmation
Letter and Save
Changes**

When you are finished with all the questions for the school proceed as follows:

If the Institution has '*Passed*,' or you are returning the application for additional information, click on the

Save and Print

button. Next click on the

Create Letter

button. This will save the document and create a letter to send to the institution, informing them that the United States Department of Education has either received their application for approval to participate in Federal Student Financial Aid Programs or is returning the application because it is incomplete. **If you have created an incomplete letter you must manually mark what parts are incomplete on the incomplete letter.**

**r. Create
Confirmation
Letter and Save
Changes
Cont'd**

If the Institution is '*Waiting on Fax/Pending*' or '*Exempt*,' click on the

Save and Print

and the

Create Letter

button. **A letter will be generated on the first entry, but only the database analysis will be reprinted when updated and forwarded..**



UNITED STATES DEPARTMENT OF EDUCATION
POSTSECONDARY EDUCATION
PARTICIPATION AND OVERSIGHT SERVICE
WASHINGTON, DC 20202-5323

<<Mail Date>>

Office of Postsecondary Education No.: <<OPE ID#>>

«Prefix» «FirstName» «LastName»

«Title»

«Institution_Name»

«Address1»

«Address2»

«City», «State» «Zip»«Dash»«Four»

Dear Officer:

This letter confirms the receipt of your institution's package to update the information you provided on your Application for Approval to Participate in Federal Student Financial Aid Programs. We are conducting a review, and as soon as our review is completed, we will either send you a letter of approval or acknowledgement, or we will ask you to submit a new application.

Thank you for your cooperation. You will be contacted by my office if additional information is required.

Sincerely,

A handwritten signature in cursive script that reads "Marianne R. Phelps".

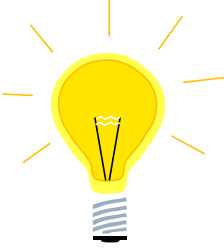
Marianne R. Phelps
Director
Institutional Participation
and Oversight Service

**s. Create
Additional
Sheet**

After the information has been entered for the particular non-recertification action click your mouse on the button

Create Additional Sheet

The following cover page will appear on the screen with a prompt for printing. Select 'print' and the appropriate region and school will automatically emerge on the cover sheet. Keep this page on top of the non-recertification package. Also, any comments to the case team regarding this application should be noted where applicable.



To: _____

This is a Non-Recertification Application for the following:

Institution: **XXXXXXXXXXXXX**

OPE ID: **#####**

They have requested:

XXXXXXXXXXXXX

Comments from DRCC:

Following is an example of the analysis form for “Initial Application with Prior History”

Initial application WITH prior history

OPE ID: 00000000
Institution Name: Sample
EEN Number:
Region:
Address 1:
Address 2:
City, State Zip:
Contact Name:
Contact Title:
Contact Phone:

Is contact person at same location? ☐ Yes ☐ No
Is the accreditation letter attached? ☐ Yes ☐ No
Valid state license/exemption with expiration at least three months after receipt?
☐ Yes ☐ No ☐ N/A
IRS Proof of 501 C (c)(3) for private non-profit? ☐ Yes ☐ No ☐ N/A
Is section E-a checked? ☐ Yes ☐ No
Is 27a complete? ☐ Yes ☐ No
Is section E-g or E-h checked? ☐ Yes ☐ No
Is 27b complete? ☐ Yes ☐ No
Is section E-i checked? ☐ Yes ☐ No
Is 27c complete? ☐ Yes ☐ No
Proof of ineligibility contract authorization? ☐ Yes ☐ No ☐ N/A
Are 36, 38, 39 & 40 complete? ☐ Yes ☐ No
Is Default Management Plan included? ☐ Yes ☐ No
Are Financial Statements on file? ☐ Yes ☐ No
Are sections A-M Included? ☐ Yes ☐ No
Original Signature in Part I? ☐ Yes ☐ No
Current Status: ☐ Passed
☐ Except
☐ Returned
☐ Waiting on Fax / Pending
Comments:
Analyst's Name:
Date Received:
Date Screened:

Save and Print **Create Additional Sheet**
Create Letter

Instructions for Questions regarding “Initial Application with Prior History” Analysis

a. See a. in first group pg. 3-10

b. See b. in first group pg. 3-10

c. See c. in first group pg. 3-10

d. Accreditation Letter

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked. If it is, click 'Yes' at the appropriate question. If it is not, click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is, click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not, click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is, click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not, click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is, click 'Yes.' If it was left blank, click 'No.'

**i. Proof of
Ineligibility
Contract
Authorization**

If Question 28 is answered ‘*No*’ in the application click ‘*N/A*.’ If it is answered ‘*Yes*’ in the application, click ‘*Yes*.’ There should be an approval form if it is answered ‘*Yes*.’ If Question 28 is not answered, click ‘*No*.’

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Sections H

Questions 36,38,39 and 40 must be answered completely for applications regarding initial, ownership or structure change, or reinstatement.

m. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

n. Section K

All questions in this section must be answered ‘*Yes*.’ If a question is answered ‘*No*’, the institution must provide an explanation in Question 69.

**o. Default
Management
Plan:**

Look for an attachment of a Default Management Plan.
Answer 'Yes' or 'No', accordingly.

**p. Financial
Statements**

The financial statements for the institution may be included with the additional information sent with the application. If any financial statements are included, click on 'Yes.' If they are not, click on 'No.'

**q. Section A-M
Included**

Check the application to determine if all sections A through M have been included and completed. If they all are present and completed, click 'Yes.' If they are not all present, click 'No'. Once you click on 'No', an additional field will be displayed. Check all sections that have been left out or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**r. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

**r. Original
Signature
Cont'd**

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**s. See p. in first
group pg. 3-14**

**t. See q. in first
group pg. 3-15**

**u. See r. in first
group pg. 3-15**

**v. See s. in first
group pg. 3-18**

Following is an example of the analysis form for "Initial Application without Prior History"

Initial application WITHOUT prior history

OPE ID: 99999999
Institution Name: Sample
EIN Number:
Region:
Address 1:
Address 2:
City, State Zip:
Contact Name:
Contact Title:
Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is the accreditation letter attached? ☐ Yes ☐ No

Valid state license/exemption with expiration at least three months after receipt?
☐ Yes ☐ No ☐ N/A

IRS Proof of 501 E(c)(3) for private non-profit? ☐ Yes ☐ No ☐ N/A

Is section E-e checked? ☐ Yes ☐ No

Is 27a complete? ☐ Yes ☐ No

Is section E-g or E-h checked? ☐ Yes ☐ No

Is 27b complete? ☐ Yes ☐ No

Is section E-i checked? ☐ Yes ☐ No

Is 27c complete? ☐ Yes ☐ No

Proof of ineligibility contract authorization? ☐ Yes ☐ No ☐ N/A

Are 36 & 38 complete? ☐ Yes ☐ No

Is Default Management Plan included? ☐ Yes ☐ No

Are sections A-M included? ☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:
Analyst's Name:
Date Received:
Date Screened:

Save and Print **Create Additional Sheet**
Create Letter

Instructions for Questions Regarding “Initial Application without Prior History” Analysis

a. See a. in first group pg. 3-10

b. See b. in first group pg. 3-10

c. See c. in first group pg. 3-10

d. Accreditation Letter

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation, click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

**i. Proof of
Ineligibility
Contract
Authorization**

If Question 28 is answered ‘*No*’ in the application, click ‘*N/A*.’ If it is answered ‘*Yes*’ in the application, click ‘*Yes*.’ There should be an approval form if it is answered ‘*Yes*.’ If Question 28 is not answered, click ‘*No*.’

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Sections H

Questions 36 and 38 regarding financial aid staff and student body must be answered completely.

m. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

n. Section K

All questions in this section must be answered ‘*Yes*.’ If a question is answered ‘*No*’, the institution must provide an explanation in Question 69.

**o. Default
Management
Plan:**

Look for an attachment of a Default Management Plan.
Answer 'Yes' or 'No', accordingly.

**p. Section A-M
Included**

Check the application to determine if all sections A through M have been included, and completed. If they all are present and completed, click 'Yes.' If they are not all present click 'No'. Once you click on 'No,' an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**q. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**r. See p. in first
group pg. 3-14**

**s. See q. in first
group pg. 3-15**

**t. See r. in first
group pg. 3-15**

**u. See s. in first
group pg. 3-18**

” Following is an example of the analysis form for “Changing Ownership or Structure”

Changing ownership or structure

OPE ID: 99999999

Institution Name: Sample

EIN Number:

Region:

Address 1:

Address 2:

City, State Zip:

Contact Name:

Contact Title:

Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is the accreditation letter attached? ☐ Yes ☐ No

Valid state license/exemption with expiration at least three months after receipt?

☐ Yes ☐ No ☐ N/A

IRS Proof of 501 K (c)(3) for private non-profit? ☐ Yes ☐ No ☐ N/A

Is section E-e checked? ☐ Yes ☐ No

Is 27a complete? ☐ Yes ☐ No

Is section E-g or E-h checked? ☐ Yes ☐ No

Is 27b complete? ☐ Yes ☐ No

Is section E-i checked? ☐ Yes ☐ No

Is 27c complete? ☐ Yes ☐ No

Proof of ineligibility contract authorization? ☐ Yes ☐ No ☐ N/A

Is date of change included? ☐ Yes ☐ No

Are 36 & 38 complete? ☐ Yes ☐ No

Is Default Management Plan included? ☐ Yes ☐ No

Are Financial Statements on file? ☐ Yes ☐ No

Is Balance Sheet showing the financial status of the institution at the time of the change included?

☐ Yes ☐ No

Are sections A-M included? ☐ Yes ☐ No

Original Signature in Part I? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

[Save and Print](#) [Create Additional Sheet](#)

[Create Letter](#)

Instructions for Questions Regarding “Changing Ownership or Structure” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

**d. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

i. Proof of

**Ineligibility
Contract
Authorization**

If Question 28 is answered '*No*' in the application click '*N/A*.' If it is answered '*Yes*' in the application, click '*Yes*.' There should be an approval form if it is answered '*Yes*.' If Question 28 is not answered, click '*No*.'

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Sections H

Questions 36 and 38 regarding financial aid staff and student body must be answered completely.

m. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

n. Section K

All questions in this section must be answered '*Yes*.' If a question is answered '*No*', the institution must provide an explanation in Question 69.

**o. Default
Management
Plan:**

Look for an attachment of a Default Management Plan. Answer '*Yes*' or '*No*', accordingly.

**p. Financial
Statements**

The financial statements for the institution may be included with the additional information sent with the application. If any financial statements are included, click on 'Yes.' If they are not, click on 'No.'

**q. Financial
Status**

Was a balance sheet received with the request for change in ownership, showing the financial status of the institution at the time of the change? Answer accordingly.

**r. Section A-M
Included**

Check the application to determine if all sections A through M have been included and completed. If they all are present and completed, click 'Yes.' If they are not all present click 'No'. Once you click on 'No', an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**s. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature click on 'Yes.' If there is no signature, or it is not original click on 'No.'

**s. Original
Signature
Cont'd**

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**t. See p. in first
group pg. 3-14**

**u. See q. in first
group pg. 3-15**

**v. See r. in first
group pg. 3-15**

**w. See s. in first
group pg. 3-18**

Following is an example of the analysis form for "Reinstatement"

Reinstatement	
OPE ID:	99999999
Institution Name:	Sample
EIN Number:	
Region:	
Address 1:	
Address 2:	
City, State Zip:	
Contact Name:	
Contact Title:	
Contact Phone:	
Is contact person at same location? <input type="radio"/> Yes <input type="radio"/> No	
Is the accreditation letter attached? <input type="radio"/> Yes <input type="radio"/> No	
Valid state license/exemption with expiration at least three months after receipt?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
IRS Proof of 501 K (c)(3) for private non-profit?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is section E-e checked?	
Is 27a complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-g or E-h checked?	
Is 27b complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-i checked?	
Is 27c complete?	<input type="radio"/> Yes <input type="radio"/> No
Proof of ineligibility contract authorization?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Are 36, 38, 39 & 40 complete?	
	<input type="radio"/> Yes <input type="radio"/> No
Is Default Management Plan included?	
	<input type="radio"/> Yes <input type="radio"/> No
Are Financial Statements on file?	
	<input type="radio"/> Yes <input type="radio"/> No
Are sections A-M Included?	
	<input type="radio"/> Yes <input type="radio"/> No
Original Signature in Part L?	
	<input type="radio"/> Yes <input type="radio"/> No
Current Status: <input type="radio"/> Passed	
	<input type="radio"/> Exempt
	<input type="radio"/> Returned
	<input type="radio"/> Waiting on Fax / Pending
Comments:	
Analyst's Name: <input type="text"/>	
Date Received: <input type="text"/>	
Date Screened: <input type="text"/>	
<input type="button" value="Save and Print"/>	
<input type="button" value="Create Additional Sheet"/>	
<input type="button" value="Create Letter"/>	

Instructions for Questions regarding Reinstatement” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

**d. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation, click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

i. Proof of

**Ineligibility
Contract
Authorization**

If Question 28 is answered '*No*' in the application click '*N/A*.' If it is answered '*Yes*' in the application, click '*Yes*.' There should be an approval form if it is answered '*Yes*.' If Question 28 is not answered, click '*No*.'

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Sections H

Questions 36,38, 39 and 40 regarding federal student financial aid programs must be answered completely.

m. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

n. Section K

All questions in this section must be answered '*Yes*.' If a question is answered '*No*', the institution must provide an explanation in Question 69.

**o. Default
Management
Plan:**

Look for an attachment of a Default Management Plan. Answer '*Yes*' or '*No*', accordingly.

p. Financial

Statements

The financial statements for the institution may be included with the additional information sent with the application. If any financial statements are included, click on ‘*Yes*.’ If they are not, click on ‘*No*.’

q. Section A-M Included

Check the application to determine if all sections A through M have been included, and completed. If they all are present and completed, click ‘*Yes*.’ If they are not all present click ‘*No*.’ Once you click on ‘*No*,’ an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful—some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

r. Original Signature

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature click on ‘*Yes*.’ If there is no signature, or it is not original click on ‘*No*.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘*Yes*,’ but add a comment at the bottom of the page saying who signed the application.

**s. See p. in first
group pg. 3-14**

**t. See q. in first
group pg. 3-15**

**u. See r. in first
group pg. 3-15**

**v. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Converting to Non Profit”

Converting to Non Profit

OPF ID: 99999999
Institution Name: Sample
EIN Number:
Region:

Address 1:
Address 2:
City, State Zip:

Contact Name:
Contact Title:
Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is the accreditation letter attached? ☐ Yes ☐ No

Valid state license/exemption with expiration at least three months after receipt?
☐ Yes ☐ No ☐ N/A

IRS Proof of 501 K (c)(3) for private non-profit? ☐ Yes ☐ No ☐ N/A

Is section E-e checked?
☐ Yes ☐ No

Is 27a complete? ☐ Yes ☐ No

Is section E-g or E-h checked?
☐ Yes ☐ No

Is 27b complete? ☐ Yes ☐ No

Is section E-i checked?
☐ Yes ☐ No

Is 27c complete? ☐ Yes ☐ No

Proof of ineligibility contract authorization? ☐ Yes ☐ No ☐ N/A

Is date of change included? ☐ Yes ☐ No

Are 36 & 38 complete? ☐ Yes ☐ No

Is Default Management Plan included? ☐ Yes ☐ No

Are Financial Statements on file? ☐ Yes ☐ No

Is Balance Sheet showing the financial status of the institution at the time of the change included?
☐ Yes ☐ No

Are sections A-M included? ☐ Yes ☐ No

Original Signature in Part I? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

[Save and Print](#) [Create Additional Sheet](#)
[Create Letter](#)

Instructions for Questions regarding “Converting to Non Profit” Analysis

a. See a. in first group pg. 3-10

b. See b. in first group pg. 3-10

c. See c. in first group pg. 3-10

d. Accreditation Letter

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation, click 'Yes.' If it has not been included, click 'N/A'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

**i. Proof of
Ineligibility
Contract
Authorization**

If Question 28 is answered ‘*No*’ in the application, click ‘*N/A*.’ If it is answered ‘*Yes*’ in the application, click ‘*Yes*.’ There should be an approval form if it is answered ‘*Yes*.’ If Question 28 is not answered, click ‘*No*.’

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Cover Letter:

Is the date of change included in the cover letter?

m. Sections H

Questions 36 and 38 regarding financial aid staff and student body must be answered completely.

n. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

o. Section K

All questions in this section must be answered ‘*Yes*.’ If a question is answered ‘*No*’, the institution must provide an explanation in Question 69.

**p. Default
Management
Plan:**

Look for an attachment of a Default Management Plan. Answer ‘*Yes*’ or ‘*No*’, accordingly.

**q. Financial
Statements**

The financial statements for the institution may be included with the additional information sent with the application. If any financial statements are included, click on 'Yes.' If they are not click on 'No.'

**r. Balance
Sheet**

Is a balance sheet included with the application package which shows the financial status of the institution at the time of change? Answer "Yes" or "No".

**s. Section A-M
Included**

Check the application to determine if all sections A through M have been included, and completed. If they all are present and completed, click 'Yes.' If they are not all present click 'No'. Once you click on 'No,' an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**t. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

**t. Original
Signature
Cont'd**

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**u. See p. in first
group pg. 3-14**

**v. See q. in first
group pg. 3-15**

**w. See r. in first
group pg. 3-15**

**x. See s. in first
group pg. 3-18**

Following is an example of the analysis form for "Merger"

Merger

OPE ID: 399999999
Institution Name: Sample
EIN Number:
Region:

Address 1:
Address 2:
City, State Zip: , ,
Contact Name:
Contact Title:
Contact Phone:

Is contact person at same location? ☐ Yes ☐ No
Is the accreditation letter attached? ☐ Yes ☐ No
Valid state license/exemption with expiration at least three months after receipt?
☐ Yes ☐ No ☐ N/A
IRS Proof of 501 K (c)(3) for private non-profit? ☐ Yes ☐ No ☐ N/A
Is section E-e checked?
Is 27a complete? ☐ Yes ☐ No
Is section E-g or E-h checked?
Is 27b complete? ☐ Yes ☐ No
Is section E-i checked?
Is 27c complete? ☐ Yes ☐ No
Proof of eligibility contract authorization? ☐ Yes ☐ No ☐ N/A
Is date of change included? ☐ Yes ☐ No
Are 36 & 38 complete? ☐ Yes ☐ No
Is Default Management Plan included? ☐ Yes ☐ No
Are Financial Statements from each pre-merger institution on file?
☐ Yes ☐ No
Is Balance Sheet from each pre-merger institution showing the financial status of the institution at the time of the change included?
☐ Yes ☐ No
Are sections A-M Included? ☐ Yes ☐ No
Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:
Analyst's Name:
Date Received:
Date Screened:

[Save and Print](#) [Create Additional Sheet](#)
[Create Letter](#)

Instructions for Questions Regarding “Merger” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

**d. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation, click 'Yes.' If it has not been included, click 'N/A'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

i. Proof of

**Ineligibility
Contract
Authorization**

If Question 28 is answered '*No*' in the application, click '*N/A*.' If it is answered '*Yes*' in the application, click '*Yes*.' There should be an approval form if it is answered '*Yes*.' If Question 28 is not answered, click '*No*.'

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Cover Letter:

Is the date of change in status included in the cover letter?

m. Sections H

Questions 36 and 38 regarding financial aid staff and student body must be answered completely.

n. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

o. Section K

All questions in this section must be answered '*Yes*.' If a question is answered '*No*', the institution must provide an explanation in Question 69.

**p. Default
Management
Plan:**

Look for an attachment of a Default Management Plan.
Answer 'Yes' or 'No', accordingly.

**q. Financial
Statements**

The financial statements for the institution may be included with the additional information sent with the application. There should be two sets of financial statements; one for each pre-merger institution on file. If both financial statements are included, click on 'Yes.' If they are not click on 'No.'

**r. Balance
Sheet**

Was a balance sheet received, for each pre-merger institution, showing the financial status of the institution at the time of change? Answer 'Yes' or 'No'.

**s. Section A-M
Included**

Check the application to determine if all sections A through M have been included, and completed. If they all are present and completed, click 'Yes.' If they are not all present click 'No'. Once you click on 'No,' an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**t. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**u. See p. in first
group pg. 3-14**

**v. See q. in first
group pg. 3-15**

**w. See r. in first
group pg. 3-15**

**x. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Deferment ”

Deferment	
OPH ID:	99999999
Institution Name:	Sample
EIN Number:	
Region:	
Address 1:	
Address 2:	
City, State Zip:	
Contact Name:	
Contact Title:	
Contact Phone:	
Is contact person at same location?	<input type="radio"/> Yes <input type="radio"/> No
Is the accreditation letter attached?	<input type="radio"/> Yes <input type="radio"/> No
Valid state license/exemption with expiration at least three months after receipt?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
IRS Proof of 501 K (c)(3) for private non-profit?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is section E-e checked?	<input type="radio"/> Yes <input type="radio"/> No
Is 27a complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-g or E-h checked?	<input type="radio"/> Yes <input type="radio"/> No
Is 27b complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-i checked?	<input type="radio"/> Yes <input type="radio"/> No
Is 27c complete?	<input type="radio"/> Yes <input type="radio"/> No
Proof of ineligibility contract authorization?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Are 36 & 38 complete?	<input type="radio"/> Yes <input type="radio"/> No
Are sections A-M included?	<input type="radio"/> Yes <input type="radio"/> No
Original Signature in Part I.?	<input type="radio"/> Yes <input type="radio"/> No
Current Status:	<input type="radio"/> Passed <input type="radio"/> Exempt <input type="radio"/> Returned <input type="radio"/> Waiting on Fax / Pending
Comments:	
Analyst's Name:	
Date Received:	
Date Screened:	
<div>Save and Print</div> <div>Create Additional Sheet</div> <div>Create Letter</div>	

Instructions for Questions Regarding “Deferment” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

**d. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

f. Non-Profit

Status

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation, click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

i. Proof of Ineligibility

**Contract
Authorization**

If Question 28 is answered ‘No’ in the application, click ‘N/A.’ If it is answered ‘Yes’ in the application, click ‘Yes.’ There should be an approval form if it is answered ‘Yes.’ If Question 28 is not answered, click ‘No.’

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Sections H

Questions 36 and 38 regarding financial aid staff and student body must be answered completely.

m. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

n. Section K

All questions in this section must be answered ‘Yes.’ If a question is answered ‘No’, the institution must provide an explanation in Question 69.

**o. Section A-M
Included**

Check the application to determine if all sections A through M have been included, and completed. If they all are present and completed, click ‘Yes.’ If they are not all present click ‘No’. Once you click on ‘No,’ an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**p. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**q. See p. in first
group pg. 3-14**

**r. See q. in first
group pg. 3-15**

**s. See r. in first
group pg. 3-15**

**t. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Branch to Freestanding”

Branch to Freestanding	
GPE ID:	99999999
Institution Name:	Sample
EIN Number:	
Region:	
Address 1:	
Address 2:	
City, State Zip:	
Contact Name:	
Contact Title:	
Contact Phone:	
Is contact person at same location? <input type="radio"/> Yes <input type="radio"/> No	
Is the accreditation letter attached? <input type="radio"/> Yes <input type="radio"/> No	
Valid state license/exemption with expiration at least three months after receipt?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
IRS Proof of 501 C (c)(3) for private non-profit?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is section E-a checked?	
Is 27a complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-g or E-h checked?	
Is 27b complete?	<input type="radio"/> Yes <input type="radio"/> No
Is section E-i checked?	
Is 27c complete?	<input type="radio"/> Yes <input type="radio"/> No
Proof of indigibility contract authorization?	
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is Default Management Plan included?	
	<input type="radio"/> Yes <input type="radio"/> No
Are Financial Statements on file?	
	<input type="radio"/> Yes <input type="radio"/> No
Are sections A-M Included?	
	<input type="radio"/> Yes <input type="radio"/> No
Original Signature in Part E?	
	<input type="radio"/> Yes <input type="radio"/> No
Current Status: <input type="radio"/> Passed	
	<input type="radio"/> Exempt
	<input type="radio"/> Returned
	<input type="radio"/> Waiting on Fax / Pending
Current Status: <input type="radio"/> Passed	
	<input type="radio"/> Exempt
	<input type="radio"/> Returned
	<input type="radio"/> Waiting on Fax / Pending
Comments:	
Analyst's Name:	
Date Received:	
Date Screened:	
<input type="button" value="Save and Print"/>	
<input type="button" value="Create Additional Sheet"/>	
<input type="button" value="Create Letter"/>	

Instructions for Questions Regarding “Branch to Freestanding” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

**d. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘Yes.’ If the letter does not meet any of the standards, click ‘No.’

e. State License

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘N/A.’ The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click ‘Yes.’ If any of the criteria are not met, click ‘No.’

**f. Non-Profit
Status**

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. Private non-profit institutions are required to submit proof of 501 (c)(3). This must be on letterhead from the IRS or the Department of Treasury. If the institution has included this documentation, click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

g. Section D

No data entry required. Be sure this section regarding ownership is filled out if the institution is for profit.

h. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

i. Proof of

**Ineligibility
Contract
Authorization**

If Question 28 is answered '*No*' in the application, click '*N/A.*' If it is answered '*Yes*' in the application, click '*Yes.*' There should be an approval form if it is answered '*Yes.*' If Question 28 is not answered, click '*No.*'

j. Section F

There should be principal location and any additional locations in this section.

k. Section G

Questions 31 - 34 regarding telecommunications and/or correspondence must be answered.

l. Sections I - J

Skip section I if this is a domestic institution. Section J should be completed only if applicable.

m. Section K

All questions in this section must be answered '*Yes.*' If a question is answered '*No*', the institution must provide an explanation in Question 69.

**n. Default
Management
Plan:**

Look for an attachment of a Default Management Plan. Answer '*Yes*' or '*No*', accordingly.

**o. Financial
Statements**

The financial statements for the institution may be included with the additional information sent with the application. There should be two sets of financial statements, one for each pre-merger institution on file. If both financial statements are included, click on 'Yes.' If they are not, click on 'No.'

**p. Section A-M
Included**

Check the application to determine if all sections A through M have been included, and completed. If they all are present and completed, click 'Yes.' If they are not all present click 'No'. Once you click on 'No,' an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful- some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

**q. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**r. See p. in first
group pg. 3-14**

**s. See q. in first
group pg. 3-15**

**t. See r. in first
group pg. 3-15**

**u. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Changing Accrediting Agency”

Changing Accrediting Agency

OPE ID:

Institution Name:

EIN Number:

Region:

Address 1:

Address 2:

City, State Zip:

Contact Name:

Contact Title:

Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is a cover letter notifying us that the institution is beginning the process of obtaining new accreditation included ? ☐ Yes ☐ No

Is OPE ID included ☐ Yes ☐ No

Is EIN Number Included? ☐ Yes ☐ No

Is letter from current & prospective accrediting agency included? ☐ Yes ☐ No

Is Question 15 answered? ☐ Yes ☐ No

Is an explanation of Question 15 in the cover letter? ☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

Instructions for Questions Regarding “Changing Accrediting Agency” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Accrediting Agency*. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes.*’ If the letter does not meet any of the standards, click ‘*No.*’

f. Question #15:

Section B, question 15 in the application must be answered with institution abbreviation, date of last accreditation and length. Also, read the cover letter for information regarding question number 15 and answer appropriately.

**g. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**h. See p. in first
group pg. 3-14**

**i. See q. in first
group pg. 3-15**

**j. See r. in first
group pg. 3-15**

**k. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Changing State Authorizing Agency”

Changing State Authorizing Agency

OPE ID:

Institution Name:

EIN Number:

Region:

Address 1:

Address 2:

City, State Zip:

Contact Name:

Contact Title:

Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is a cover letter notifying us of a change included? ☐ Yes ☐ No

Is OPE ID included ☐ Yes ☐ No

Is EIN Number Included? ☐ Yes ☐ No

Is approval from state agency included? ☐ Yes ☐ No ☐ N/A

Is Question 17 answered? ☐ Yes ☐ No

Is an explanation of Question 17 in the cover letter? ☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

Instructions for Questions Regarding “Changing State Authorizing Agency” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing State Authorizing Agency*. Indicate as to whether a cover letter was received and if the OPE ID and EIN numbers were included in this letter.

e. State Approval

There should be state approval, either by letter or certificate, included with the request. If there is not, mark ‘*No*’ in the appropriate space.

f. Question #17:

Section B, question 17 in the application must be answered with suitable institution type and agency information. Also, read the cover letter for information regarding question 17 and answer appropriately.

**g. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**h. See p. in first
group pg. 3-14**

**i. See q. in first
group pg. 3-15**

**j. See r. in first
group pg. 3-15**

**k. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Changing Educational Programs Outside the Scope of Your Current Approval”

Changing Educational Programs outside the scope of your current approval

OPE ID: Institution Name: EIN Number: Region: Address 1: Address 2: City, State Zip: Contact Name: Contact Title: Contact Phone: Is contact person at same location? ☐ Yes ☐ NoIs a cover letter notifying us of a change included? ☐ Yes ☐ NoIs OPE ID included ☐ Yes ☐ NoIs EIN Number Included? ☐ Yes ☐ NoIs letter from an accrediting agency included? ☐ Yes ☐ NoIs approval from state agency included? ☐ Yes ☐ No ☐ N/AIs Question 26 answered? ☐ Yes ☐ No

Is an explanation of Question 26 in the cover letter?

☐ Yes ☐ NoOriginal Signature in Part L? ☐ Yes ☐ NoCurrent Status: ☐ Passed☐ Exempt☐ Returned☐ Waiting on Fax / PendingComments: Analyst's Name: Date Received: Date Screened: **Save and Print****Create Additional Sheet****Create Letter**

Instructions for Questions Regarding “Changing Educational Programs Outside the Scope or your current Approval” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Educational Programs Outside the Scope or Your Current Approval*. Indicate as to whether the cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes.*’ If the letter does not meet any of the standards, click ‘*No.*’

f. State Approval

Question 17 of the application details who is required to send a state approval. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click 'N/A.' The state approval must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

g. Section E

Question #26 of Section E should be completed on the application. An explanation of question #26 should also be included in the cover letter.

f. Original Signature

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**g. See p. in first
group pg. 3-14**

**h. See q. in first
group pg. 3-15**

**i. See r. in first
group pg. 3-15**

**j. See s. in first
group pg. 3-18**

*Following is an example of the analysis form for “Addition of Non-degree Programs
Outside the Scope of Your Current Approval”*

Addition of non-degree programs outside the scope of your current approval

OPE ID: Institution Name: EIN Number: Region: Address 1: Address 2: City, State Zip: Contact Name: Contact Title: Contact Phone: Is contact person at same location? ☐ Yes ☐ NoIs a cover letter notifying us of a change included? ☐ Yes ☐ NoIs OPE ID included ☐ Yes ☐ NoIs EIN Number Included? ☐ Yes ☐ NoIs letter from an accrediting agency included? ☐ Yes ☐ NoIs approval from state agency included? ☐ Yes ☐ No ☐ N/AIs Question 27 answered? ☐ Yes ☐ No

Is an explanation of Question 27 in the cover letter?

☐ Yes ☐ NoOriginal Signature in Part L? ☐ Yes ☐ NoCurrent Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / PendingComments: Analyst's Name: Date Received: Date Screened: **Save and Print****Create Additional Sheet****Create Letter**

Instructions for Questions Regarding “Addition of non-degree programs Outside the Scope or your current Approval” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is requesting an *Addition of Non-degree Programs Outside the Scope or Your Current Approval*. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes.*’ If the letter does not meet any of the standards, click ‘*No.*’

f. State Approval

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click 'N/A.' The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

g. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

Read cover letter for explanation of *Addition of Non-degree Programs Outside the Scope of Your Current Approval.*

**h. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**i. See p. in first
group pg. 3-14**

**j. See q. in first
group pg. 3-15**

**k. See r. in first
group pg. 3-15**

**l. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Changing From or To Clock or Credit Hours”

Changing from or to Clock or Credit hours

OPE ID:

Institution Name:

EIN Number:

Region:

Address 1:

Address 2:

City, State Zip:

Contact Name:

Contact Title:

Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is a cover letter notifying us of a change included? ☐ Yes ☐ No

Is OPE ID included ☐ Yes ☐ No

Is EIN Number Included? ☐ Yes ☐ No

Is letter from an accrediting agency included? ☐ Yes ☐ No

Is approval from state agency included? ☐ Yes ☐ No ☐ N/A

Is Question 27 answered? ☐ Yes ☐ No

Is an explanation of Question 27 in the cover letter? ☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

Instructions for Questions Regarding “Changing from or to, Clock or Credit Hours” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing from or to, Clock or Credit Hours*. Indicate as to whether the cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes*.’ If the letter does not meet any of the standards, click ‘*No*.’

f. State Approval

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click 'N/A.' The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

g. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

Read cover letter for explanation of *Changing from or to Clock or Credit Hours*.

h. Original

Signature

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**i. See p. in first
group pg. 3-14**

**j. See q. in first
group pg. 3-15**

**k. See r. in first
group pg. 3-15**

**l. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Addition of a Location”

Addition of a Location

OPE ID: 99999999
Institution Name: Sample
EIN Number:
Region:
Address 1:
Address 2:
City, State Zip:
Contact Name:
Contact Title:
Contact Phone:
Is contact person at same location? ☐ Yes ☐ No
Is a cover letter notifying us of a change included? ☐ Yes ☐ No
Is OPE ID included ☐ Yes ☐ No
Is EIN Number Included? ☐ Yes ☐ No
Is letter from an accrediting agency included? ☐ Yes ☐ No
Is approval from state agency included? ☐ Yes ☐ No ☐ N/A
Is Question 30 answered? ☐ Yes ☐ No
Is an explanation of Question 30 in the cover letter?
☐ Yes ☐ No
Original Signature in Part I? ☐ Yes ☐ No
Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending
Comments:
Analyst's Name:
Date Received:
Date Screened:

Save and Print

Create Additional Sheet

Create Letter

Instructions for Questions Regarding “Addition of Location” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Adding a Location*. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes*.’ If the letter does not meet any of the standards, click ‘*No*.’

f. State Approval

Question 17 of the Application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click ‘*N/A*.’ The state license must have valid dates. A certificate or a letter is acceptable. The license

must include the name of the state agency. If these criteria are met, click ‘*Yes.*’ If any of the criteria are not met, click ‘*No.*’

g. Section F

Question 29 and 30 of the application must be answered with the principal and additional name and locations. Also, read cover letter for information regarding question 30.

**h. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘*Yes.*’ If there is no signature, or it is not original, click on ‘*No.*’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘*Yes,*’ but add a comment at the bottom of the page saying who signed the application.

**i. See p. in first
group pg. 3-14**

**j. See q. in first
group pg. 3-15**

**k. See r. in first
group pg. 3-15**

**l. See s. in first
group pg. 3-18**

Following is an example of the analysis form for “Changing Federal Student Financial Aid Programs for Which you are Approved”

Changing Federal Student Financial Aid Programs for which you are approved

OPE ID:
Institution Name:
EIN Number:
Region:

Address 1:
Address 2:
City, State Zip:

Contact Name:
Contact Title:
Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is a cover letter notifying us of a change included? ☐ Yes ☐ No

Is OPE ID included ☐ Yes ☐ No

Is EIN Number Included? ☐ Yes ☐ No

Is Question 37 answered? ☐ Yes ☐ No

Is an explanation of Question 37 in the cover letter?

☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

Save and Print

Create Additional Sheet

Create Letter

Instructions for Questions Regarding “Changing Federal Student Financial Aid Programs for which you are Approved” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Federal Student Financial Aid Programs for Which you are Approved*. Indicate as to whether a cover letter was received and if the OPE ID and EIN numbers were included in this letter.

e. Section H

Question 37 in the application must be answered indicating all of the federal student financial aid programs in which the institution would like to participate. Also, read cover letter for information regarding question 37, and answer appropriately.

**f. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**g. See p. in first
group pg. 3-14**

**h. See q. in first
group pg. 3-15**

**i. See r. in first
group pg. 3-15**

**j. See s. in first
group pg. 3-18**

” Following is an example of the analysis form for “Changing Name of the Institution”

Changing Name of the Institution

OPE ID:

Institution Name:

EIN Number:

Region:

Address 1:

Address 2:

City, State Zip:

Contact Name:

Contact Title:

Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is date of change included? ☐ Yes ☐ No

Is a cover letter notifying us of a change included? ☐ Yes ☐ No

Is OPE ID included ☐ Yes ☐ No

Is EIN Number Included? ☐ Yes ☐ No

Is letter from an accrediting agency included? ☐ Yes ☐ No

Is approval from state agency included? ☐ Yes ☐ No ☐ N/A

Is Question 2 answered? ☐ Yes ☐ No

Is an explanation of Question 2 in the cover letter? ☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

Instructions for Questions Regarding “Changing Name of the Institution” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Name of the Institution*. Date of change should be included in the cover letter. Indicate as to whether the cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes*.’ If the letter does not meet any of the standards, click ‘*No*.’

f. State Approval

Question 17 of the application details who is required to send a state license. If you are dealing with an institution that is not

required to submit a license, a letter of exemption must be attached. If letter is acceptable, click 'N/A.' The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

g. Section A

Question 2 and 3 of the application must be answered with the current and prior name of the institution. Also, read cover letter for information regarding question 2.

**h. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**i. See p. in first
group pg. 3-14**

**j. See q. in first
group pg. 3-15**

**k. See r. in first
group pg. 3-15**

**l. See s. in first
group pg. 3-18**

*” Following is an example of the analysis form for “Changing Name of
CEO/President/Chancellor”*

Changing Name of CEO/President/Chancellor

OPE ID: 99999999
Institution Name: Sample
EIN Number:
Region:
Address 1:
Address 2:
City, State Zip:
Contact Name:
Contact Title:
Contact Phone:
Is contact person at same location? ☐ Yes ☐ No
Is date of change included? ☐ Yes ☐ No
Is a cover letter notifying us of a change included? ☐ Yes ☐ No
Is OPE ID included ☐ Yes ☐ No
Is EIN Number Included? ☐ Yes ☐ No
Is Question 10 answered? ☐ Yes ☐ No
Is an explanation of Question 10 in the cover letter? ☐ Yes ☐ No
Original Signature in Part L? ☐ Yes ☐ No
Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending
Comments:
Analyst's Name:
Date Received:
Date Screened:

Save and Print

Create Additional Sheet

Create Letter

Instructions for Questions Regarding “Changing Name of CEO/President/Chancellor” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Name of CEO/President/Chancellor*. Date of change should be included in the cover letter. Indicate as to whether the cover letter was received and if the OPE ID and EIN numbers were included in this letter.

e. Section A

Question 10 of the application must be answered with information regarding executive officers. Also, read cover letter for information regarding question 10.

**f. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘Yes,’ but add a comment at the bottom of the page saying who signed the application.

**g. See p. in first
group pg. 3-14**

**h. See q. in first
group pg. 3-15**

**i. See r. in first
group pg. 3-15**

**j. See s. in first
group pg. 3-18**

” Following is an example of the analysis form for “Changing Name of Chief Fiscal Officer /Financial Officer”

Changing Name of Chief Fiscal Officer Financial Officer

OPE ID:
Institution Name:
EIN Number:
Region:

Address 1:
Address 2:
City, State Zip:

Contact Name:
Contact Title:
Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is date of change included? ☐ Yes ☐ No

Is a cover letter notifying us of a change included? ☐ Yes ☐ No

Is OPE ID included ☐ Yes ☐ No

Is EIN Number Included? ☐ Yes ☐ No

Is Question 11 answered? ☐ Yes ☐ No

Is an explanation of Question 11 in the cover letter?
☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

Save and Print

Create Additional Sheet

Create Letter

Instructions for Questions Regarding “Changing Name of Chief Fiscal Officer/Financial Officer” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Name of Chief Fiscal Officer /Financial Officer*. Date of change should be included in the cover letter. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

e. Section A

Question 11 of the application must be answered with information regarding the Chief Financial Officer. Also, read cover letter for information regarding question 11.

**f. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**g. See p. in first
group pg. 3-14**

**h. See q. in first
group pg. 3-15**

**i. See r. in first
group pg. 3-15**

**j. See s. in first
group pg. 3-18**

” Following is an example of the analysis form for “Changing Principal Location Address Only”

Changing Principal Location-address only

OPE ID: 99999999
Institution Name: Sample
EIN Number:
Region:
Address 1:
Address 2:
City, State Zip: , ,
Contact Name:
Contact Title:
Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is date of change included? ☐ Yes ☐ No

Is a cover letter notifying us of a change included? ☐ Yes ☐ No

 Is OPE ID included ☐ Yes ☐ No

 Is EIN Number included? ☐ Yes ☐ No

Is letter from an accrediting agency included? ☐ Yes ☐ No

Is approval from state agency included? ☐ Yes ☐ No ☐ N/A

Is Question 29 answered? ☐ Yes ☐ No

 Is an explanation of Question 29 in the cover letter? ☐ Yes ☐ No

Original Signature in Part I? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:
Analyst's Name:
Date Received:
Date Screened:

Save and Print

Create Additional Sheet

Create Letter

Instructions for Questions Regarding “Changing Principal Location - address only” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Principal Location - address only*. Date of change should be included in the cover letter. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes.*’ If the letter does not meet any of the standards, click ‘*No.*’

f. State Approval

Question 17 of the application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click 'N/A.' The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

g. Section F

Question 29 in the application must be answered with the new principal location of the institution. Also, read cover letter for information regarding changing the location, and answer appropriately.

**h. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**i. See p. in first
group pg. 3-14**

**j. See q. in first
group pg. 3-15**

**k. See r. in first
group pg. 3-15**

**j. See s. in first
group pg. 3-18**

” Following is an example of the analysis form for “Changing Other Location-Address Only”

Changing Other Location-address only

OPE ID: "99999999"

Institution Name: "Sample"

EIN Number: "

Region: "

Address 1: "

Address 2: "

City, State Zip: " " " " " " " "

Contact Name: " " " "

Contact Title: "

Contact Phone: "

Is contact person at same location? ☐ Yes ☐ NoIs date of change included? ☐ Yes ☐ NoIs a cover letter notifying us of a change included? ☐ Yes ☐ NoIs OPE ID included ☐ Yes ☐ NoIs EIN Number Included? ☐ Yes ☐ NoIs letter from an accrediting agency included? ☐ Yes ☐ NoIs approval from state agency included? ☐ Yes ☐ No ☐ N/AIs Question 29 answered? ☐ Yes ☐ No

Is an explanation of Question 29 in the cover letter?

☐ Yes ☐ NoOriginal Signature in Part I? ☐ Yes ☐ NoCurrent Status: ☐ Passed☐ Exempt☐ Returned☐ Waiting on Fax / Pending

Comments: " "

Analyst's Name: " " "

Date Received: " "

Date Screened: " "

Save and Print**Create Additional Sheet****Create Letter**

Instructions for Questions Regarding “Changing Other Location - address only” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Other Location - address only*. Date of change should be included in the cover letter. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

**e. Accreditation
Letter**

The accreditation letter will be located with the additional material that was sent with the application. The letter must be on the accrediting agency letterhead. Certificates are not acceptable as an accreditation letter. Check to see if the accreditation dates are valid. If the dates are past, the letter is invalid. If the accreditation letter meets all standards, click ‘*Yes.*’ If the letter does not meet any of the standards, click ‘*No.*’

f. State Approval

Question 17 of the application details who is required to send a state license. If you are dealing with an institution that is not required to submit a license, a letter of exemption must be attached. If letter is acceptable, click 'N/A.' The state license must have valid dates. A certificate or a letter is acceptable. The license must include the name of the state agency. If these criteria are met, click 'Yes.' If any of the criteria are not met, click 'No.'

g. Section F

Question 30 in the application must be answered with the new principal location of the institution. Also, read the cover letter for information regarding changing the location, and answer appropriately.

**h. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on 'Yes.' If there is no signature, or it is not original, click on 'No.'

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**i. See p. in first
group pg. 3-14**

**j. See q. in first
group pg. 3-15**

**k. See r. in first
group pg. 3-15**

**l. See s. in first
group pg. 3-18**

” Following is an example of the analysis form for “Changing Third Party Servicers that Deal with Federal Student Financial Aid”

Changing Thirds Party Servicers that deal with Federal Student Financial Aid

OPE ID: Institution Name: EIN Number: Region: Address 1: Address 2: City, State Zip: Contact Name: Contact Title: Contact Phone: Is contact person at same location? ☐ Yes ☐ NoIs date of change included? ☐ Yes ☐ NoIs a cover letter notifying us of a change included? ☐ Yes ☐ NoIs OPE ID included ☐ Yes ☐ NoIs EIN Number Included? ☐ Yes ☐ NoIs Question 58 answered? ☐ Yes ☐ No

Is an explanation of Question 58 in the cover letter?

☐ Yes ☐ NoOriginal Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments: Analyst's Name: Date Received: Date Screened:

Instructions for Questions Regarding “Changing Third Party Servicers that deal with Federal Student Financial Aid” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Third Party Servicers that deal with Federal Student Financial Aid*. Date of change should be included in the cover letter. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

e. Section J

Question 58 in the application must be answered with information regarding any third-party or outside servicer. Also, read cover letter for information regarding changing the location, and answer appropriately.

**f. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘Yes.’ If there is no signature, or it is not original, click on ‘No.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes,' but add a comment at the bottom of the page saying who signed the application.

**g. See p. in first
group pg. 3-14**

**h. See q. in first
group pg. 3-15**

**i. See r. in first
group pg. 3-15**

**j. See s. in first
group pg. 3-18**

” Following is an example of the analysis form for “Changing Board of Directors”

Changing Board of Directors

OPE ID:

Institution Name:

EIN Number:

Region:

Address 1:

Address 2:

City, State Zip:

Contact Name:

Contact Title:

Contact Phone:

Is contact person at same location? ☐ Yes ☐ No

Is date of change included? ☐ Yes ☐ No

Is a cover letter notifying us of a change included? ☐ Yes ☐ No

Is OPE ID included ☐ Yes ☐ No

Is EIN Number Included? ☐ Yes ☐ No

Is Question 20 answered? ☐ Yes ☐ No

Is an explanation of Question 20 in the cover letter? ☐ Yes ☐ No

Original Signature in Part L? ☐ Yes ☐ No

Current Status: ☐ Passed
☐ Exempt
☐ Returned
☐ Waiting on Fax / Pending

Comments:

Analyst's Name:

Date Received:

Date Screened:

Save and Print **Create Additional Sheet**

Create Letter

Instructions for Questions Regarding “Changing Board of Directors” Analysis

**a. See a. in first
group pg. 3-10**

**b. See b. in first
group pg. 3-10**

**c. See c. in first
group pg. 3-10**

d. Cover Letter

A cover letter should be included as part of the package from an institution that is *Changing Board of Directors*. Date of change should be included in the cover letter. Indicate as to whether cover letter was received and if the OPE ID and EIN numbers were included in this letter.

e. Section C

Question 20 in the application must be answered with information regarding the Board of Directors. Also, read the cover letter for information regarding changing the Board of Directors, and answer appropriately.

**f. Original
Signature**

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature, click on ‘*Yes*.’ If there is no signature, or it is not original, click on ‘*No*.’

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click ‘*Yes*,’ but add a comment at the bottom of the page saying who signed the application.

**g. See p. in first
group pg. 3-14**

**h. See q. in first
group pg. 3-15**

**i. See r. in first
group pg. 3-15**

**j. See s. in first
group pg. 3-18**

4.1 Foreign School Applications Chapter Outline

- **Application completeness check**
- **For institutions over \$500,000**
 - Financial statements completeness check*
 - Financial statements additional review*
- **Correspondence**

Foreign School Applications

Background

Foreign schools, like domestic schools, will be solicited by the Department for submission of applications for recertification in Title IV funding. These institutions are subject to the same requirements as domestic schools. Financial statements along with compliance and financial audits are due with application packets. In addition, Foreign schools are asked to send their most recent catalog and legal authorizations and their certified English translations.

Objectives

This section will help you to:

- Access the correct database and institution record
 - Determine completeness of submission
 - Enter the applicable information from the application package
 - Analyze information which requires judgment
-
- After completing step 6, double click on the highlighted line of text to open the form. (For directions on how to locate an institution see the **1.1 Getting Started with Lotus Notes** section of this manual.)

Open Id:
Institution Name:

Address1:
Address2:
City, Country, Zip:

Contact name:
Contact Title:
Contact Phone:

If extension enter extension date:

Is contact person at the same location? ☐ Yes ☐ No

Valid documentation of licensure in English? ☐ Yes ☐ No ☐ N/A

English translation of non-profit status? ☐ Yes ☐ No ☐ N/A

Is Section E-e checked? ☐ Yes ☐ No

Is 27a complete and in English? ☐ Yes ☐ No

Is Section E-g or E-h checked? ☐ Yes ☐ No

Is 27b completed and in English? ☐ Yes ☐ No

Is E-i checked? ☐ Yes ☐ No

Is 27c completed and in English? ☐ Yes ☐ No

Is section I Questions 41-45 answered? ☐ Yes ☐ No

Is section I Question 46 answered? ☐ Yes ☐ No ☐ N/A

Are Questions 47-57 answered? ☐ Yes ☐ No

Original signature? ☐ Yes ☐ No

Sections A-M included? ☐ Yes ☐ No

Is financial statement attached? ☐ Yes ☐ No

Is there a compliance audit or a letter of engmnt attached?
☐ Compliance Audit
☐ Letter of Engagment
☐ Neither

Current Recertification Status:

☐ Received
☐ Undeliverable

Recertification Application Analyst Name:

Date Application was Received:

Date of Recertification Screening:

Comments on Recert App:

FFEL RATES: 1992 1993 1994

► [Click this arrow to view the completeness check information.](#)

► [Click this arrow to view the additional review information](#)

Instructions for Questions for Foreign School Applications

(Before you begin to enter any data you must first double click on the form to open it. If application is not located in the database note on the front of the form, make record of on correspondence database and give to foreign school case team.)

1. Contact Information

The contact person information will be located on the application in Section A, Question 14, which is located on page 6 of the pre-printed application. Fill in the name, title, and phone number as requested. When entering name information, place prefix in first set of brackets, first name and middle initial in second set, and last name in third set.

2. Extension

If an extension for completion of the application was given to the school, the individual who granted the extension will notify you. If they have given an extension, enter the new deadline date.

3. Contact Person Location

Check the address of the contact person with that of the school's address at the top of the screen. If the addresses are the same click 'Yes', if they are different, click 'No'. If you click 'No', an additional field will be displayed asking for the address information. Fill in the address for the contact person. (This is the address for all correspondence concerning this application.) Input the country and zip code information in the spaces provided.

4. Licensure

The license for an institution will be located with the additional material that was sent with the application. It may be a separate form, or it may be included in the prospectus, calendar, or catalog. The licensure must be in English or it is unacceptable. Most commonly a license will be in some type of legislation or in a letter from a governing agency. If a license is included, click 'Yes.' If the institution is public, click 'N/A.' If the license is not required, click 'No.'

5. Non-Profit Status

The documentation to support an institution's non-profit status will be located in the additional material that was sent with the application. This must be in English. This may be any official form which proclaims the school to be non-profit. Private non-profit institutions are required to submit proof of non-profit status. If the institution has included this documentation click 'Yes.' If it has not been included, click 'No'. If the institution does not require non-profit documentation, click 'N/A'.

6. Section E

Section E is located on pages 17 through 23 in the application.

- Check to see if Question 26 part e is checked, if it is click 'Yes' at the appropriate question. If it is not click 'No'. Clicking 'Yes' will prompt another question which asks if 27 part a is completed. Check to see if Question 27 part a is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Next, check to see if Question 26 parts g and h have been checked. If either one has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part b is completed. Check to see if Question 27 part b is completed. If it is click 'Yes.' If it was left blank, click 'No.'

- Then, check to see if Question 26 part i has been checked. If it has, click 'Yes' at the appropriate question. If it is not click 'No.' Clicking 'Yes' will prompt another question which asks if 27 part c is completed. Check to see if Question 27 part c is completed. If it is click 'Yes.' If it was left blank, click 'No.'

7. Section I

Section I is located on pages 27-33 in the application.

-If Questions 41-45 are complete, click 'Yes.' If they are incomplete, click 'No.'

-If Question 46 is answered 'Yes,' click 'Yes.' If it is not complete, click 'No.' If the institution answered 'No,' click 'N/A.'

8. Original Signature

Check to see if Section L, on page 38 of the application, has an original signature. (A faxed page will not qualify, nor will a stamped signature.) If there is an original signature click on 'Yes.' If there is no signature, or it is not original click on 'No'.

This signature should be from someone in authority to make binding contracts for the institution; such as the president, CEO, or chancellor of the institution. If there is an original signature by someone not having authority to make contracts for the institution, or you believe this may be the case, still click 'Yes', but add a comment at the bottom of the page saying who signed the application.

9. Section A-M Included

Check the application to determine if all sections A through M have been included and completed. If they all are present and complete, click 'Yes.' If they are not all present, click 'No.' Once you click 'No' an additional field will be displayed. Check all sections that have been left out, or are not complete. (Be careful some sections will ask a question in the beginning, and if the institution answered a certain way, they will be instructed to go onto the next part of the application.)

10. Financial Statements:

The financial statements for the institution may be included with the additional information sent with the application. If any financial statements are included, click on 'Yes.' If they are not click on 'No.'

11. Compliance Audit

The compliance audit or a letter of engagement to have a compliance audit performed, will be included in the additional information sent with the application. If a compliance audit report or a letter of engagement is included click on 'Yes.' If neither one is included click 'Neither'.

12. Status

If you have received any part of an application from the school click 'Received.' If an application is returned because it cannot be delivered for any reason, and you cannot re-mail it to the proper address click 'Undeliverable'.

13. Miscellaneous Information at Bottom of Form

- Type in your name where it asks for the '*Recertification Application Analyst Name.*'
- Enter the stamped date that the application was received in the office where it asks for the '*Date Application was Received.*'
- Enter the date that you worked on the application where it asks for '*Date of Recertification Screening.*'
- In the '*Comments on Recert App*' area type in any information that the case team should be aware of when looking at the school. This is also a good place for the analyst to note what may be missing from the application. For example, a comment

may read
are being

“Section G and Question 27 part b missing. These
faxed.”

14. Schools Receiving more than \$500,000 in Title IV Funding

If a school is receiving more than \$500,000 Title IV, HEA funds a completeness check and an additional review must be performed on the financial statements. Do not perform review if these are not translated into US dollars and compliance with GAAP

- If this is the case at the bottom of the form it will say ‘*Click this arrow to view the completeness check information*’. Click on the arrow and perform a completeness check. (For instructions on how to perform completeness checks look at the financial section on domestic school in this manual.)

- Once the completeness check is finished perform an additional review. To get to this section click on the arrow that says “*Click this arrow to view the additional review information.*” (For instructions on how to perform additional reviews look at the financial section on domestic school in this manual.)

- If the institution receives less than \$500,000 in Title IV, HEA funding, you will not have the completeness check and additional review information available for the school.

15. Create Confirmation Letter and Save Changes

The confirmation letters discussed below were never mailed to the institutions. The Foreign school case team decided to make all contact through their team and not through the DRCC.

When you are finished with all the questions for the school, click the **Create Confirmation Letter & Save Changes** button. This will save the document and create a letter to send to the institution, informing them that the United States Department of Education has received their application for approval to participate in Federal Student Financial Aid Programs. The letter at this point is pending and will need to be sent later.

5.1 Miscellaneous Duties

Chapter Outline

- **Mail Receipt Function**
 - Pick up mail*
 - Date stamp*
 - Log in correspondence database*
 - Distribute*
- **Dun & Bradstreet**
 - Translate Weekly Alert Service Reports*
 - E-mail reports to appropriate persons*
 - Run special reports when needed*
 - Keep up with cost reports and responsibility*
- **Institution mail outs**
 - Solicitation, reminder, delinquent letters*
 - Labels*
 - Copy center and mailing contractors*
 - Returned receipts*
 - Undeliverable applications*
- **Determinants**
 - Data Discrepancy*
- **Other**
 - Phones*

Miscellaneous Duties Chapter Outline

Background

There are several duties DRCC performs, which are not designated to one specific area. The following section should cover the general instructions for responsibilities outside of analysis of recertification applications.

Objectives

This section will help you to:

- Handle correspondence
- Run Dun & Bradstreet reports
- Data Discrepancy

Miscellaneous Duties

Mail Function

- Pick up or obtain mail
- Stamp with current date stamp
- Log out on correspondence database, if applicable
- Distribute to:
 - Ratio group
 - Case team
 - Recertification group
 - Compliance team

Pick up mail

Applications should be received either from the P.O. Box or the secretaries. Schools have the option to mail applications to the building address or the P.O. Box.

U.S. Department of Education
Institutional Participation and Oversight
Service
P.O. Box 44805
L'Enfant Plaza Station
Washington, D.C. 20026-4805

-or-

U.S. Department of Education
Institutional Participation and Oversight
Service
7th and D Streets, S.W.
GSA Building, Room 3522
Washington, D.C. 20407-5323

The P.O. Box is located at L'Enfant Plaza. Take the keys and go to the post office. This should be done daily or weekly depending on expected volume.

Date Stamp

All incoming mail should be stamped with current date and sorted. Mail will usually consist of Recertification Applications, Non-recertification Applications, Financial Statements, Compliance Audits and Case Team Correspondence. Separate accordingly.

Log Out

Anything going directly to the case team should be logged out on the Correspondence Database. Institution name, OPE ID number, destination, brief description and date received along with your name should be recorded in this database. The following page will describe access and entry for the Correspondence Database. **1.1 Getting Started with Lotus Notes** can guide you through the steps of entering a Lotus Notes database.

Correspondence Log



Database Icon

Correspondence Log - All Mail\By Case Team - Lotus Notes

File Edit View Create Actions Window Help

Current Archive Delete

DRCC CORRESPONDENCE

Archived Mail
Clearinghouse
Phone Log
Current Mail
By Type
By Receipt
By Case Team
Add Mail
Add Letter Type
Administration
Exit

#	ACN	OPEID	Institution Name	State	FYE/Pd	End Date
1	ERROR: Server error: Entry not found in index					
1140	0000000	OPEID				
554	Atlanta Case Team					
4	Forwarded					
1	Reject Resubmission					
3	SFA Audit					
550	Pending					
197	Boston Case Team					
422	Chicago Case Team					
516	Dallas Case Team					
207	Denver Case Team					
6	Foreign Schools Case Team					
272	Kansas City Case Team					
357	New York Case Team					
320	Philadelphia Case Team					
557	San Francisco Case Team					
190	Seattle Case Team					
4739						

DeeDee

Click on this
button to add a
new
correspondence
record

Fill in appropriate information. Click on one of the "Save" buttons to save information.

Correspondence Creation Form - Lotus Notes

File Edit View Create Actions Text Window Help

Close Window Add a Comment Save Save & Add Another Save and Exit Delete Undelete

DRCC Compliance Audits Mail Receipt

OPEID: 03001500

Carthage Beauty College
215 Highway 35 North
Carthage, MS 39051-4015

Atlanta Region

Re-select Institution Add Entity

Discrepancy Check

Is the address the same as on the correspondence? ☒ Yes ☐ No

Inbox

Where did this correspondence originate? L'Enfant Plaza

Outbox

Which department receives this correspondence? Compliance Audits

What type of correspondence is this? SFA Audit

Enter the ACN 04-1996-84506

What is the audit reporting period?
Begin Date: 07/01/96
End Date: 12/31/96

Processing Information

Forwarded to: Compliance Audits

Date Correspondence Received: 08/19/98

Date Correspondence Forwarded: 08/19/98

[None] DeeDee

Distribute

After mail has been separated, deliver to the appropriate group. The recertification group will be responsible for the recertification and non-recertification applications. Financial statements and audits will go to the ratio group, while compliance audits are given to the compliance team. Other correspondence will be sent on to the case teams located in the Washington DC office, after being entered into the correspondence database.

Dun & Bradstreet

- Background information
- Translate Weekly Alert Service Reports
weekly
- E-mail reports to appropriate persons
weekly
- Run special reports when needed
- Keep up with cost reports and responsibility
monthly

Overview

Dun and Bradstreet is a servicer DRCC has contracted with to provide financial activity monitoring for the Department of Education. The universe of information is provided by the Department. Dun and Bradstreet assigns institutions unique numbers after locating the institutions by name, address, and OPE ID number. The six categories included in this monitoring process are: public-record filings, operational changes, D&B rating changes, PAYDEX score changes, financial changes, and Uniform Commercial Code filings. Every week a disk is sent from Dun and Bradstreet containing Alert Services information. This information will be translated using the software provided by Dun and Bradstreet. Information is sent by Access file to specific Department employees. Special reports may be requested by the Department and can be generated using DunsLink software. A modem must also be available in order to download reports.

D&B Contacts

- Alert Services disks are received weekly via John Donally. Call John if the disk is not received at 610-882-6269
- Donna Cecil and Jim Rogers are the local points of contact. Their offices are in Falls Church, VA; Donna's phone number is (703) 845-2731 and Jim's is (703) 845-2733. Direct technical support questions to Donna or Jim.

Alert Services

Translate Data

Once a week a disk from Dun & Bradstreet is sent with the Alert Services information. We translate this data to a format that is accessible.

2. The software to translate this data is located on C:\DFC\dfc.exe. In file manager or windows explorer double click on this file to open.

A table to the left side of the screen will appear similar to this....

Dun's File Conversion	
Select Input File	
Select Field or Record Ranges	
Select PC Software Product	
Select Output File	
Translate Data	
Exit Dun's File Conversion	
Selections	
From:	
To:	
Range:	
[Arrows]:Move Light Bar [Enter]:Select [Esc]:Done [F1]:Help	

3. Place 3 1/2 inch disk in the A drive, and press enter on *Select Input File*. Select the file with the extension "cng" (ALERTSVC.CNG) for the input data file. Under *Select Field or Record Ranges* the range of records should be "all". Enter on *Select PC Software Product* and choose dBase III plus.

Select Output File, this should be named for the last day of the report (month and day). This designates where the data will go when it is translated, and it usually goes under C:\Edproj and last day of the report.

4. Choose *Translate Data*. After the data has been translated then click on *Exit Dun's File Conversion*.

5. Go to Microsoft Access software. Create a database under Microsoft Access to import the translated data. When you open Microsoft Access choose File and New Database. Set this up under K:\shared\kpmgfile\recertif\dunnbrad and import the translated data store in C:\Edproj\ (last day of report).

6. View data in the table to ensure that it is accessible and that its format is acceptable. Make sure the name of the table is the same month and day.

E-Mail Reports

7. Close and exit Microsoft Access. Prepare an email with the above file as the attachment and send to Patricia Trubia, Keith Kistler, Kriste Jordan, and Ti Baker. Sample text is "Attached is the database containing financial status changes for the schools registered with Dun and Bradstreet's Alert Services for the period ending (month and day). Please call me at xxx-xxxx if you have questions. Thanks, XXXXX"
Attach the Access file and make sure it is the one with the .mdb extension.

8. Disks are kept for back up purposes so prior weeks database files can be deleted.

Special Reports

Dun and Bradstreet reports can be provided to individual analysts. These requests must be approved and signed off by Greg James before they can be run. We must have the company or institution name and location is required in order to perform the search. Open DunsLink for Windows and make sure phone line where modem is attached is clear of all messages.

- Open D&B Desktop Solutions by double-clicking mouse on icon.
- Select *Search on Company*.
- The minimum information to perform search is the institution name and state. Branch locations may appear, select institution with matching address per analyst request.
- To order report double click on name on left hand side of screen. Select type of report. “Credit scoring” reports are very basic and “comprehensive business” reports are the most complex and expensive. A “family tree” report will link companies which are related.
- Endorsement should contain name of requester and should never be left blank.
- Select *Submit Now* and then *Open Database*. Choose desired report and print. Under options for log on information password is **kpmdlk** and ID# is **623905**. These reports will be stored on hard drive for future reference.
- A help line is available if you have questions or problems while running the report : 1-800-234-3867. Account number is 61-18773.

Cost Reports

Monthly Summarized Usage Reports and Dun & Bradstreet Customer Inquiry List are received on a monthly basis through the mail. The Monthly Summarized Usage Report shows the original number of units and dollar amount originally purchased at the beginning of the contract. The contract year runs from April to April. This report should show the units used during the month and the amount remaining. The Customer Inquiry List gives a more detailed description of the special reports run and the analyst requesting these reports by endorsement. Usage and purchases should be track on Excel worksheet located at:

K:/shared/kpmgfile/ashley/Dun&B.xls on D&B page. Check these against amounts on reports for differences. Also, make sure amount left in account is ample.

Institution Mail Outs

- Solicitation, reminder, delinquent letters
- Labels
- Copy center and mailing contractors
- Undeliverable Applications
- Return Receipt Cards

Letters

Patti Patterson in the PIP office will prepare letters for general mass mailings. Correspondence to be included will be solicitation, reminder and delinquent letters. Letters will be prepared for the President and the Financial Aid Coordinator. A flat file will need to be accessed in order to develop mailing labels for the original solicitation.

Labels

Labels will be prepared for the U.S. Department with the applicable P.O. Box, President and Financial Aid Coordinator of the institution. Duplicates must be made to place on return receipt cards.

Copy Center and Mailing Contractors

Coordinate mailing process between TPIP contractors and DMSI. These contractors may be different, ask your Department of Education contact person for correct contractors. Attach mailing instructions and give to mailing contractors.

Mailing Instructions

This mailing is for Cohort X.X for approximately XXX institutions. Two envelopes will be mailed to each institution - one to the President and one to the Financial Aid Director. Please mail the envelope to the President's office first. The Financial Aid Director's envelope should be mailed directly after the President's envelope. (Contents of each envelope are listed below.) **All letters should have the President's label affixed in appropriate brackets**

1. Envelope to the **President**

- Apply on the Outside of the Envelope
 - ⇒ the **President's label** to the front of the envelope
 - ⇒ the return receipt to the back of the envelope

[the return receipt card should have the **President's label** on the front side and the **Department of Education's label** on the back side. Check ✓ certified/return receipt boxes on the return receipt card.]

- Include on the Inside of the Envelope
 - ⇒ letter to the President dated XXX [affix the **President's label** on this letter where noted]
 - ⇒ application
 - ⇒ disk
 - ⇒ disk instructions

2. Envelope to the **Financial Aid Director**

- Apply on the Outside of the Envelope
 - ⇒ the **Financial Aid Director's label** to the front of the envelope
- Include on the Inside of the Envelope
 - ⇒ letter to the Financial Aid Director dated XXX [affix the **Director's label** on this letter where noted]

Please call XXXXX XXXXXX upon completion of the job and if you have any questions at (202) 205-1938.

Undeliverable Applications

When an application is returned, photocopy the envelope, list page of solicitation letter, and attached a note to the case teams asking for new address.

Do not mark a school where applications were undeliverable “exempt” until you get approval from Patti Patterson. It is the case team’s responsibility to find a new address or notify you if the school is closed. You can also check the closed school database.

Once you get a new address, remail the application and record new mailing date on the photocopies.

Return Receipt Cards

These green Certified mail receipts will be received back to the DRCC through the P.O. Box. Separate these by groupings of application due date.

A quick way to separate the receipts is to look at the signature date and the application due date.

When you mail an application to a school, send it certified/return receipt and write which mailing (1st, 2nd etc.) on the green card.

Return Receipt Cards Cont'd

If a school calls and says that they never received their application get the mailing information and a point of contact and phone number. First check the database to verify if we have it and check the address. Look for the green receipt card. If you find it call the point of contact and say “We would be happy to send you another application although we have a copy of our return receipt card which was signed by _____ on _____.” Refer all extension requests to the Co-team leaders although they are rarely given. In the past the PPA expiration date remained the same and the school was encouraged to mail in the application as soon as possible.

Data Discrepancy

Determinant

Some information is unable to be identified or attached to the correct school. After our two main sources have been exhausted (Lotus Notes and PEPS) a record called “Data Discrepancy” is formed.



Database Icon

OPE ID#	Institution Name	Case Team	Date	Date Returned	Status
02180000	Jewish Employment & Vocational	Philadelphia	05/11/97	10/06/97	☺
02180480	Tapeka Schools Inc.	Atlanta	05/11/97	8/15/97	☺
02292480	Columbia Beauty Academy	Tampa City	05/11/97	8/15/97	☺
02296480	Tyler School of Secretarial S	Chicago - Allen H	10/17/97		☺
02381980	Business Training Institute	New York	05/23/97		☺
02392080	New York Institute of Business	New York	05/24/97		☺
02394080	Colonial Heights Beauty Acad	Philadelphia	05/16/97		☺
02395080	Institute of Cosmetology & Skin	Atlanta	05/11/97	10/1/97	☺
02397600 30	H.D. Adcock & Associates	Tampa City	10/23/97		☺
03020080	Huntsville Business Institute	Atlanta	05/11/97	10/1/97	☺
03060580	CA Medical School of Shiatsu	San Francisco	10/15/97		☺
03097280	Aesthetics Institute of Cosmet	Philadelphia	05/17/97		☺
03125080	Advertising & Design Educator	Atlanta	05/11/97	10/05/97	☺
03133080	Future Barber College	Atlanta	05/26/97		☺
03167280	Tyler International School of	Dallas	10/06/97	10/27/97	☺
03180280	Meditech/Health Care Trainer	Philadelphia	05/13/97		☺
03190280	Christian Life Center	Chicago	10/22/97		☺

Click on this button to enter a new record.

Master View for Data Discrepancy Log.

The master information screen will summarize the OPE ID #, Institution Name, Case Team, Date Sent, Date Returned, and whether it was resolved.



The smiley face indicates that the discrepancy has been cleared.



The frown shows that the discrepancy is outstanding.

Enter New Record

Click the mouse on the *EnterDiscrepancy* button to enter a new record. Enter the Institution name, OPE ID#, discrepancy, comments, applicable case team, initials, and current date. Save and print this form and attach to the document in question. Place the document with the attached cover sheet in the case team box.

DRCC Data Discrepancy Form

Resolved:	Date returned to DRCC:
<input type="radio"/> yes <input type="radio"/> no	

Institution Name:

OPE ID(s):

The DRCC has reviewed the Financial Statements, PEPS, and Lotus Notes. We can not determine the following:

- | | |
|--|---|
| <input type="checkbox"/> OPE ID(s) | <input type="checkbox"/> Active / Inactive Status |
| <input type="checkbox"/> Institution Name | <input type="checkbox"/> Eligibility Status |
| <input type="checkbox"/> Institution Address | <input type="checkbox"/> Fiscal Year End |
| <input type="checkbox"/> Closed Status | <input type="checkbox"/> Other |

DRCC Additional Comments:

Regional Case Team:

DRCC Initials:

Date sent to Case Team: 11/03/97

Case Team Comments:

Case Team Initials: _____

Resolved

When the *Data Discrepancy Form* is returned with the document from the case team to the DRCC open previous record on the database. Search for the record using OPE ID # or institution name. Hi-light the record line and press enter or double click the mouse. Mark appropriate circle for resolved status and the date returned to the DRCC. Save and print form then place in box for CBMI to file. Continue to process document as suitable.

Other

Incoming Phone Calls

A phone number maybe listed on correspondence letters sent to institutions. This number will be a “hot line” for institutions seeking answers to questions regarding the Application for Approval to Participate in Federal Student Financial Aid Programs. If you are unable to field the question properly, refer the question to the appropriate case team member. Record phone calls which need assistance in the *Correspondence Database*.

Closed School Database

An electronic version can be found in the Recertif folder in KPMG’s shared file on the K drive. It is called closed.mdb. It is an Access database. This database was downloaded around February 25, 1997. The closed school database should be updated regularly.

A hardcopy of this report and directions on how to use ED’s closed school database can be found with reference material.

Reports

Press the “Reports” button in your cohort database (near the top of the screen). The Screened Report (button is on the left hand side of screen) report gives you all institutions in the “passed” and “exempt” categories.

The Complete Report gives you all institutions in the passed category.

The Delinquent report gives you all of the institutions that do not show any activity. For our purposes delinquent means that the application does not fall in the Passed, Exempt, Returned, or Pending category. On the Cohort report that is given to Greg James every Friday, we refer to the delinquents as “Not

Received”. The language was changed to assist the case team members.