

## APPLICATION FOR A TEMPORARY AVOCATIONAL CLASSROOM

Please refer to ACCET Document 26 – Policy on Additional Locations and Changes of Location for definitions of different types of additional locations, the eligibility criteria for making application for additional locations, and the process for seeking and obtaining the required prior approval for additional locations.

ACCET ID #: \_\_\_\_\_

### Temporary Avocational Classroom Information

Name of Institution (from state license, if applicable): \_\_\_\_\_

Street Address (not P.O. Box): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Distance from the supervising main or branch campus: \_\_\_\_\_

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

Class Start Date: \_\_\_\_\_

Class End Date: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Email: \_\_\_\_\_

### Main/Branch Campus Information

Main  or Branch Campus  (Check the site responsible for supervising the temporary classroom and providing enrollment and student support services to its students.)

Name of Institution (from state license, if applicable): \_\_\_\_\_

Street Address (not P.O. Box): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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

Main/Branch Director: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

I verify that the information contained in this application for approval of a temporary classroom and the accompanying materials are true and correct.

Name/Title of Chief Executive Officer (or Designee): \_\_\_\_\_

Signature of CEO: \_\_\_\_\_ Date: \_\_\_\_\_

A copy of each of the following items must be submitted as part of the institution's application for a temporary avocational classroom. Initial each blank to verify inclusion and number each exhibit with the corresponding item number. If any of the requested documentation does not apply to the institution, please write "N/A" in the blank and provide an explanation in the comment section below.

- \_\_\_\_\_ 1. Listing of the name and clock hours of all programs and courses to be offered at the site. For courses, also identify the name of the program in which the courses are included.
- \_\_\_\_\_ 2. Narrative report in which the following information is provided:
  - a. Name of site supervisor;
  - b. Projected student occupancy; and
  - c. Distance from the main or branch campus responsible for supervising the temporary classroom.
- \_\_\_\_\_ 3. A use and occupancy certificate and/or a fire and safety certificate (i.e. the use and occupancy certificate may also serve as evidence of the institution's compliance with applicable local, state, and federal fire safety regulations).

Note: This documentation is not required, if the temporary avocational classroom is located on the site of a postsecondary educational institution that is accredited by an accrediting agency recognized by the US Department of Education (USDE). Instead, provide documented evidence that the host institution is accredited by an accrediting agency recognized by USDE.

- \_\_\_\_\_ 4. Application fee, as specified in ACCET Document 10 – Fee Schedule.

COMMENTS/EXPLANATIONS: \_\_\_\_\_

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