

**SAA-3**

**LETTER OF TRANSMITTAL**

Date Mailed: \_\_\_\_\_

School Name: \_\_\_\_\_ Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

- A. This is a notification of:**
- 1.  New Approval
  - 2.  Revised Approval
  - 3.  Withdrawal of Approval
  - 4.  Suspension of Approval

**B. Authority for this notification is prefaced upon:**

- 1.  a. CFR 21.4233       c. CFR 21.4253       e. CFR 21.4256       g. CFR 21.4265       i. CFR 21.4267
- b. CFR 21.4235       d. CFR 21.4254       f. CFR 21.4264       h. CFR 21.4279

2.  CFR 21.4259 Duration of suspension is \_\_\_\_\_ days. CFR 21.4259(A)(1) permits suspending an approval for up to sixty (60) days.  
Reason(s) for suspension: \_\_\_\_\_ Effective Date: \_\_\_\_\_

3.  Title 38, U.S.C., Section 3679 (withdrawal of approval)  
Reason(s) for withdrawal \_\_\_\_\_ Effective Date: \_\_\_\_\_

**C. Conditions for approval are indicated on School Application dated: \_\_\_\_\_**

**D. Remarks: Date completed application approval package received by SAA \_\_\_\_\_**

**E. Enclosures: As Shown on Part XI of School Application.**

**F. 1. An on-site inspection was made of the school's facilities and equipment on (date): \_\_\_\_\_**  
Therefore, upon considering the school's facilities, equipment, and application, I  do  do not recommend approval.

\_\_\_\_\_  
Signature, Educational Consultant;  
State Approving Agency for Veterans Training.

2. Effective date of approval: \_\_\_\_\_

3. \_\_\_\_\_  
Signature, Director;  
State Approving Agency for Veterans Training

This is an application to the State Approving Agency to train veterans in accordance with Chapter 36, Title 38, U.S. Code.

PART I - IDENTIFICATION

School Name: \_\_\_\_\_ Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

PART II - CLASSIFICATION AND AGREEMENT

A.  Public Supported  Private Profit  Private Non-Profit

B.  Corporation  Partnership  Individually Owned  Not Applicable

C.  Accredited by \_\_\_\_\_ based upon CFR 21.4253(A), Item \_\_\_\_\_.

D.  Non-accredited, based upon CFR 21.4254.

E. Agreement:

1. I do hereby certify information contained in the school's catalog and this application are true and correct in content and policy. Subsequently, the above named institution is qualified and equipped to provide training for veterans in accordance with Chapter 36, Title 38, U.S. Code. The school maintains complete student records at the main campus. Records consist of recorded information relevant to policies published in this catalog. Enforcement of published policies are also recorded onto the student's record. Periodically, the school provides the student a record of their academic standing. Each graduate is awarded at least a certificate of completion.

2. \_\_\_\_\_  
Name of official Title

\_\_\_\_\_  
Signature Date

PART III - MAXIMUM TEACHER-STUDENT RATIO FOR NON-ACCREDITED SCHOOLS

A. Indicate the maximum teacher-student ratio for non-accredited schools: 1 - \_\_\_\_\_

PART IV - PROGRAM(S)\*

1	2	3	4			5	6	7	8
PROGRAM TITLE	PROF. OBJ.	EDUC. OBJ.	VOCATIONAL OBJECTIVE			LENGTH	DVA FULL TIME	ENROLL. LIMIT	COURSE DESCRIPT.
			JOB TITLE	D.O.T. NUMBER	THEORY LAB				
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							
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	<input type="checkbox"/>	<input type="checkbox"/>							
	<input type="checkbox"/>	<input type="checkbox"/>							

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| <p>1. List the Title of the Program Objective.</p> <p>2. Place an "X" if the objective is Professional.</p> <p>3. Place an "X" if the objective is Educational.</p> <p>4. Complete all three items if objective is Vocational.<br/>List Job Title<br/>List D.O.T. number corresponding to Job Title.<br/>List Theory/Lab. in clock hours. Example: 350/650</p> | <p>5. The basis for each approval must be considered when completing this item. If Professional: List either years, Cr. Hrs. or Cl. Hrs., as applicable.<br/>If Educational: List either credit hours or Carnegie Units.<br/>If Vocational: List Clock Hours.</p> <p>6. If Professional: List Cr. Hrs. or Cl. Hrs.<br/>If Educational: List Credit Hours or Carnegie Units.<br/>If Vocational: List Clock Hours or Cr. Hours.</p> | <p>7. For non-accredited program only: List the maximum number of students that can be instructed on any given day.</p> <p>8. List the page numbers of current school catalog that shows course(s) recognized toward completion of the program.</p> |
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PART V - TWO YEAR PERIOD OF OPERATION

A. Do the provisions of the two year period of operation apply to the courses listed in this approval?  Yes  No

B. Identify the applicable subparagraph(s) of CFR 21.4251 and related DVA publications which justify the yes or no listed above \_\_\_\_\_

PART VI - SCHOOL ADMINISTRATION AND STAFF

A. List the following information to identify the school's administration and staff.

1. School's Governing Body	Volume No. _____	School Year(s) _____	Page(s) _____
	_____	_____	_____
2. School's Administration	Volume No. _____	School Year(s) _____	Page(s) _____
	_____	_____	_____
3. School's Faculty	Volume No. _____	School Year(s) _____	Page(s) _____
	_____	_____	_____

PART VII - DESCRIPTION OF SCHOOL RESOURCES

A. List school catalog page(s) that describe facilities in the school. \_\_\_\_\_

B. List school catalog page(s) that describe equipment available for instructional use. \_\_\_\_\_

PART VIII - FEE SCHEDULE

A. List the school catalog page(s) that clearly indicate the school's tuition rates \_\_\_\_\_, related instructional fees \_\_\_\_\_, student registration fee(s) \_\_\_\_\_, other student fees \_\_\_\_\_.

B. List the school catalog page(s) that clearly indicate the school's refund policy \_\_\_\_\_.

NOTE: Any school offering program(s) that are not accredited must follow the Department of Veterans Affairs refund policy stated in CFR 21.4255 for each program not accredited.



PART X - SCHOOL POLICIES

Part A is to be completed for schools that offer only accredited programs. Part A and B is to be completed for schools that offer non-accredited programs.

List the school catalog page(s) that clearly indicate the following school policies.

Part A

Part B

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|---|--|
| <p>a. Admission Requirement.<br/>_____</p> <p>b. Standards of Conduct Policy.<br/>_____</p> <p>c. Conditions for dismissal for unsatisfactory conduct.<br/>_____</p> <p>d. Policy for granting credit for previous education and training.<br/>_____</p> <p>e. Grading System.<br/>_____</p> <p>f. Minimum grades considered satisfactory.<br/>_____</p> <p>g. Conditions for interruption for unsatisfactory grades or progress.<br/>_____</p> <p>h. Description of the probationary period, if any.<br/>_____</p> <p>i. Conditions for reentrance after unsatisfactory progress/conduct.<br/>_____</p> <p>j. Attendance/Absence Policy, (NCD only).<br/>_____</p> | <p>k. Enrollment Dates.<br/>_____</p> <p>l. Leave Policy.<br/>_____</p> <p>m. Tardiness Policy.<br/>_____</p> <p>n. Class-Cut Policy.<br/>_____</p> <p>o. Make-Up Work Policy.<br/>_____</p> <p>p. Policy for Interrupting a Student for Unsatisfactory Attendance.<br/>_____</p> <p>q. School Calendar (Holidays Observed and Vacation Periods).<br/>_____</p> <p>r. Policy for granting a certificate to the student upon satisfactory completion of training.<br/>_____</p> |
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PART XI - REQUIRED DOCUMENTATION

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| <p>1. <input type="checkbox"/> School catalog or bulletin certified as true and correct in content and policy.</p> <p>2. <input type="checkbox"/> Statement of assurance of compliance with equal opportunity laws (VA 27-8206).</p> <p>3. <input type="checkbox"/> Field experience program (SAA-13).</p> <p>4. <input type="checkbox"/> Independent study (SAA-13).</p> <p>5. <input type="checkbox"/> Certifying official(s) (VA 22-8794).</p> <p>6. <input type="checkbox"/> Conflicting interests certification for proprietary schools (VA 22-1919).</p> | <p>7. <input type="checkbox"/> Proof of accreditation.</p> <p>8. <input type="checkbox"/> Notarized statement regarding advertising (SAA-13).</p> <p>9. <input type="checkbox"/> Change of ownership, management, name or location (SAA-6).</p> <p>10. <input type="checkbox"/> Registration certificate.</p> <p>11. <input type="checkbox"/> Two Year period of operation (SAA-5).</p> <p>12. <input type="checkbox"/> Financial statement.</p> | <p>13. <input type="checkbox"/> Fire inspection of school facilities.</p> <p>14. <input type="checkbox"/> Sanitation inspection.</p> <p>15. <input type="checkbox"/> Floor plan.</p> <p>16. <input type="checkbox"/> Proof of ownership.</p> <p>17. <input type="checkbox"/> Student enrollment contract.</p> <p>18. <input type="checkbox"/> Other (List).</p> |
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