



Wyoming Department of Education

Richard Crandall, Director
Hathaway Building, 2nd Floor, 2300 Capitol Avenue
Cheyenne, WY 82002
Phone: 307-777-7675 | Fax: 307-777-6234 | Website: edu.wyoming.gov

REGISTRATION APPLICATION FOR CHAPTER 1 NON-DEGREE GRANTING PROPRIETARY SCHOOLS

FEES:

\$10,000 Original Performance bond OR Irrevocable Standby Letter of Credit with valid dates of July 1st – June 30th of the registration year

\$200.00 License Fee

Registered Agent fee - \$100.00 (for **Each** agent)

CHAPTER 1 FORMS:

PSL Form 610 B – Non-degree granting initial application

PSL Form 15 – Agent Application

PSL Form 14 – Personnel information (All owners, staff, & instructors)

PSL Form 18 – Licensing History Disclosure

DOCUMENTATION PROVIDED BY THE INSTITUTION

Provide an alphabetical list of administrators, faculty, and staff

Attendance record form

Current professional credentials for all owners, instructors, and staff

Probationary academic/discipline policy

Enrollment contract

Current financial statement

Tuition fees and other charges

Compliance with city, county, and state regulations

Refund schedule

Description of instructional methods/outlines

Course outlines for each course

Mission statement

Copy of graduation certificate

Contact Name: _____ **Title:** _____

Institution Name: _____

Office Use Only:

License Number: _____

Date Approved: _____

Application Fee: _____

Agents: _____

CHAPTER 1
REGISTRATION APPLICATION FOR
NON-DEGREE GRANTING PROPRIETARY SCHOOLS

Registration for the period of July 1, _____ through June 30, _____

Name of School:	Contact Name:
Telephone Number:	Fax Number:
Mailing Address	Physical Address (if different)
Street Address:	Street Address:
City/State/Zip:	City/State/Zip:
Email:	Website:
<div style="display: flex; justify-content: space-between;"> Initial Application Annual Renewal </div>	Date of Initial License:
Check items which appropriately characterize this school: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">____ Profit</div> <div style="width: 50%;">____ Non-Profit</div> <div style="width: 50%;">____ Franchised</div> <div style="width: 50%;">____ Individually Owned</div> <div style="width: 50%;">____ Partnership</div> <div style="width: 50%;">____ Corporation</div> <div style="width: 50%;">____ Business</div> <div style="width: 50%;">____ Trade</div> <div style="width: 50%;">____ Technical</div> <div style="width: 50%;">____ Other (Specify) _____</div> </div>	
Does an accreditation body approved by the United States Department of Education accredit the above institution? ____ Yes ____ No <i>If yes, please provide a copy of the accreditation certificate.</i>	

Institution assures that this school is in compliance with local, city, and county ordinances, and state laws relating to the health and safety of all persons upon the premises and complies with all requirements of “Wyoming Private School Licensing Rules and Regulations”.

The above information is true and correct to the best of my knowledge and belief.

Chief Administrator (print or type)

Date

Signature

Title



Wyoming Department of Education

Richard Crandall, Director
Hathaway Building, 2nd Floor, 2300 Capitol Avenue
Cheyenne, WY 82002
Phone: 307-777-7675 | Fax: 307-777-6234 | Website: edu.wyoming.gov

PSL15
09/13

CHAPTER 1 WYOMING PRIVATE SCHOOL LICENSING APPLICATION TO LICENSE AGENTS

Name of Institution: _____

Registration Period: July 1, _____ through June 30, _____

Pursuant to Wyo. Stat. 21-2-403, I hereby apply for a Registered Agent's License that entitles me to solicit business for the above referenced institution within the State of Wyoming in accordance with Wyo. Stat. 21-2-401 through 407. I pledge to serve in this capacity within the spirit and letter of the law.

Registered Agent's Name (Print) (_____) _____
Area Phone Number
Code

Street Address

City State Zip

Registered Agent's Signature Date

I have carefully reviewed the qualifications and the personal data of the above applicant and believe that he/she will perform as pledged above. I request that he/she be issued a permit to solicit business for our school in the State of Wyoming.

Name (print) Phone Number

Position – Chief Administrative or
Executive Officer (print)

Signature

Office Use Only:

License Number:	_____
Date Approved:	_____
Application Fee:	_____

CHAPTER 1
PERSONNEL INFORMATION

Name of School:		
Position held <i>(check more than one if appropriate)</i> :		
Chief Administrator	School Director	Licensed Agent
Instructor	Other(please specify):	

Personal Information:		
Name:	Address:	
City/Zip/State	Phone Number:	
Formal Education:		
Name of Schools or Colleges:	Date Last Attended:	Degree Earned:
Name of Schools or Colleges:	Date Last Attended:	Degree Earned:
Name of Schools or Colleges:	Date Last Attended:	Degree Earned:
Work Experience:		
Employer - Address:	Position Held:	Dates (From-To):
Employer - Address:	Position Held:	Dates (From-To):
Employer - Address:	Position Held:	Dates (From-To):

I HAVE HAVE NOT been dismissed from any position for immoral or unprofessional conduct or had a license or permit revoked or suspended for similar reasons.

The above information is true and correct to the best of my knowledge and belief.

Employee Name (Print or Type)

Date

Employee Signature

CHAPTER 1
WYOMING PRIVATE SCHOOL LICENSING
LICENSING HISTORY DISCLOSURE

Name of School:

Pursuant to Wyoming Statute §21-2-401 and the Wyoming Department of Education, the institution must disclose whether its license has been revoked, suspended, denied, or has not been renewed by the licensing jurisdiction of another state. If such action has been taken against the institution, a detailed explanation of the reasons for the action must be included with this application. Additionally, any and all documents relating to any subsequent judicial or administrative proceedings must be submitted.

1. Have any of the institution's employees (including: applicant, co-owners, management, marketing and/or other operational personnel) ever had their license revoked, suspended, denied or not renewed in this state or another state?

NO YES

If yes, please explain:

Action:

Date:

Jurisdiction:

2. Has the applicant/licensee had past or current material misrepresentation or omission in any information submitted to the Department of Education or failed to report any change in information in a timely manner?

NO YES

If yes, please explain:

Action:

Date:

Jurisdiction:

I have carefully reviewed W.S. §§21-2-401 through 21-2-407. The above information is true and correct to the best of my knowledge and belief.

Name (Printed)

Title (President/Owner)

Signature

Date