

## Exemption from Institutional Authorization Application Guidelines and Procedures

**Institutions:** Institutions seeking Exemption from Institutional Authorization need to submit the appropriate Exemption application, based on programmatic offerings. The Application Guidelines & Procedures listed below explain the Exemption Application submission and review process conducted by the Commission's Institutional Authorization staff.

Institutions are strongly advised to review and follow these procedures to prevent delays in their application's review and status determination.

### A.) Initial Phase – Institutional Preparation

1. Institutions seeking an Exemption from Institutional Authorization must review the Exemption application type most relevant to their programming.
2. Institutions must collect all required documents and materials identified in the application. This includes having a final version of the Institution's catalog, which is delivered to prospective students upon approval by Commission staff. See catalog requirements below for more details.

### B.) Phase Two – Application Submission

1. Submit the completed application and all supporting documentation outlined in the application below (see Checklist of Materials) in one transmission by email to [EED.ACPE-IA@alaska.gov](mailto:EED.ACPE-IA@alaska.gov).
2. Do **not** submit materials separately.
3. Applications that contain large file sizes can be sent to [EED.ACPE-IA@alaska.gov](mailto:EED.ACPE-IA@alaska.gov) using State of Alaska [ZendTo](#).
4. Application fees must be paid either by check, made out to the Alaska Commission on Postsecondary Education, or via an ACH Deposit. If the Institution wishes to make payment via ACH Deposit, contact [EED.ACPE-IA@alaska.gov](mailto:EED.ACPE-IA@alaska.gov) for instructions.

### C.) Phase Three – Application Review

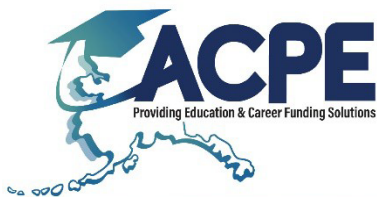
1. Applications are not reviewed until all required documentation, including application fee, are received.
2. Commission staff review the submission based upon the merits of the application. Commission staff may provide feedback or request additional documentation to determine whether the Institution meets Exemption Requirements.
3. Standard application review is approximately two weeks once all materials have been received. However, the anticipated timeline may take longer. Institutions are expected to submit a complete application packet. Incomplete packets and/or Institutional delays will result in a review delays.
4. Applications substantially out of compliance with Commission requirements and/or substantially incomplete may be returned or denied.

### D.) Final Phase – Determination

1. After review, Exempt applications may be approved by Commission staff for up to five years.
  - i. Should a change occur in the Institution's organization or program(s), deviating from its approved Exemption, IA Commission staff must be notified. Commission staff will determine if the Institution's Exempt status will be re-evaluated.
  - ii. Institutions are responsible for applying prior to the expiration of their current approval.

A postsecondary educational institution **may not** use the term "university" or "college" in its name unless it is accredited.

Accredited means accredited by a national accreditation association, or the regional accredited association for the area where the school is located; that is recognized by the Secretary of Education of the United States Department of Education.



## Application for Exemption from Institutional Authorization 20 ACC 17.015(a)(7) – Program Offered for the Actual Cost

Any individual or institution offering postsecondary instruction within the State of Alaska must be either Authorized or Exempt from Authorization by the Alaska Commission on Postsecondary Education (ACPE) under Alaska Statute (AS) 14.48.

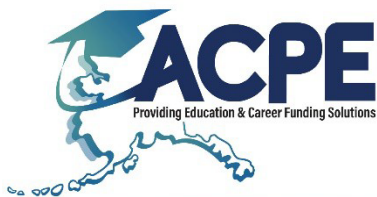
**Instructions:** Complete pages 1 through 3 of this form. Upon receipt of this form, ACPE will determine if the Institution meets the requirements for Exemption.

**NOTE:** While exempt from the requirements of Authorization, Exempt Institutions must comply with educational consumer protection statutes ([AS 14.48.060\(b\)](#), [14.48.130](#), [14.48.150](#), [14.48.170](#), and [14.48.180-14.48.210](#)) and their associated regulations.

**EXEMPTION REASON:** A program that is provided without charging tuition or fees, except for the actual cost of materials and supplies needed to successfully meet the learning objectives of the program.

### CHECKLIST MATERIALS: All requested materials below must be attached to this application in order for the application to be evaluated

1. Copy of State of Alaska Business License and Corporation License.
2. Do the programs listed require any regulatory body's requirements for operation, programming, or certification?
3. Breakdown, by program, of actual cost of materials and supplies, as it relates to the learning objectives of the program.
4. An electronic or physical copy of the Institution's catalog. The provided catalog **must** include, at the minimum:
  - a. Name and address and place of instruction and administrative office, including contact information and hours of operation.
  - b. Names and titles of the administrative and instructional staff.
  - c. The date of the publication and the time period for which the information contained is in effect.
  - d. Admission process and timeline, including the process of applications, interviews, and the selection of possible students, prior to the enrollment date. The timeline or deadline in which students must apply, in order to be enrolled for an upcoming class.
  - e. Course descriptions, content, and length of course, which includes the expected number of lecture and practical hours or applications, which curriculum is used.
  - f. A schedule of tuition, fees, and other associated costs, everything the student must know prior to enrollment, such as application fees, tools, books.
  - g. A description of the minimum requirements necessary for successful performance in a course of study and for entrance into the particular vocational field for which the student seeks training.
  - h. The requirements for earning a certificate or diploma.
  - i. A refund policy, including dates of when refunds may be requested, if partial refunds are given, and when students may expect a refund to be issued.
  - j. Grievance policy with availability of appeal to the Commission, with Commission contact information.
  - k. A statement describing where student records are maintained and how the student may obtain and access them.
5. Resumes/Curricula Vitae and applicable licenses of the designated supervisor, who is directly responsible for the content and methods of instruction, the selection, supervision, and evaluation of instructors, the organization of the classes, maintenance of facilities and equipment, and maintenance of proper scholastic records.
6. A single copy of the certification or diploma issued by the institution.
7. Nonrefundable \$250.00 application fee (either Check or ACH Transaction).
8. Institutions are required to abide by and retain documentation under [AS 14.48.165\(b\)](#), for a period of at least one year after the students last date of attendance. A copy of this documentation can be found [here](#), in which the Institution is to utilize. ACPE requests a written statement from the Institution that they will abide by and retain this document.



**I. Institution Information:**

Institution Name: \_\_\_\_\_

Principal Officer Name: \_\_\_\_\_

Principal Officer Title: \_\_\_\_\_ Institution's Web Address: \_\_\_\_\_

State Authorizing, Approval, or Governing Body: \_\_\_\_\_

Accreditation or Other Governing body (if applicable): \_\_\_\_\_

**CONTACT INFORMATION**

Name of Administrative Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**PRIMARY LOCATION**

Address: \_\_\_\_\_

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

**MAILING ADDRESS (if different)**

Address: \_\_\_\_\_

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

**OTHER LOCATIONS (if applicable) | NOTE: If all locations do not fit on this page, provide attachment with locations**

Address 2: \_\_\_\_\_

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

Address 3: \_\_\_\_\_

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

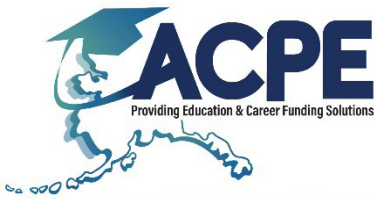
**II. Certification:**

I certify that the information provided is accurate and complete to the best of my knowledge, and that the institution meets the exemption reason selected above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Owner or Administrative Official)

Printed Name of Administrative Official: \_\_\_\_\_

Title of Administrative Official: \_\_\_\_\_



**III. Programs Sheet:**

List below all programs of study, the total clock or credit hours required, the credential awarded (certificate/diploma/degree), and the total program cost. Provide additional pages if necessary.

Program Name	Total Clock or Credit Hrs	Credential Earned	Total Program Cost