Administrative Cover Sheet for NC-SARA Institutional Application (Circle One: Initial or Renewal)

Thi	s Institution, per the		has determined th	e signature auth	ority on this A	pplication shall	
		Department)					
be			as the	Signatu	Signatures and Initials on the		
Арр	plication mean the Institution will con	nply with the requ	irements of participa	ation, and will pa	ly the annual S	State fee for	
SAF	RA in the amount of \$ paid b	oy an <i>(Date)</i>	d the annual NC-SAR	A fee of \$	paid by	 (Date)	
In a	addition, the Institution affirms the fo	llowing (item num	bers align with the i	tem number on t	he SARA appli	ication):	
			-				
1.					Last Auditad		
	Doc Type: Doc loc (Word/PDF/Excel)	(URL)	_ Audited By: _	(Name)	Last Auditeu.	(Date)	
2	Accreditation & Current Status: The	Institution is degr	ee granting in good	standing with an	accrediting b	ody recognized	
	by the U.S. Dept. of Ed. (DOE) and fo	-		-			
	Doc Type: Doc loc	ation:	Audited By:		Last Audited:		
4.	Federal Financial Responsibility Com	•		-			
	Doc Type: Doc loc	ation:	_ Audited By: _		Last Audited:		
5.	The institution agrees to abide by the Interregional Guidelines for the Evaluation of Distance Education.						
5.			_ Audited By: _				
6.	3 rd Party Accountability: The Institut	ion is responsible	for actions of 2 rd par	ty providers use	d to ongogo in	operations	
0.	Doc Type: Doc loc						
			_				
7.	Institutional Complaint Process: The	Institution has su	ch a process and agr	ees to work with	its state porta	al entity and NC-	
	SARA to resolve online education co	mplaints.					
	Doc Type: Doc loc	ation:	_ Audited By: _		Last Audited:		
9. Professional Licensure Disclosures: Per federal regulation 34 CFR668.43, the Institution agrees to individual disclosures to students/prospective students for professional licensure and certificatio						-	
	Doc Type: Doc loc	•	•				
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10.	Instruction Assurance: If the Institut	ion cannot fully d	eliver what a student	t has contracted	for, there are	adequate	
	measures to protect students, espec	cially in the case o	f a closure.				
	Doc Type: Doc loc	ation:	_ Audited By: _		Last Audited:		
		h					
11.	Catastrophic Events: The Institution	•					
	Doc Type: Doc loc	auun	_ Audited by: _				
15	Data: The Institution provides annua	al reporting of dist	ance ed enrollment	s & out-of-state	earning place	ments	
10.	-		Audited By:				