



Institutional Change of Name Application

Institution Current Name: _____

Institution New Name: _____

Address of Main Campus: _____

City/State/Zip: _____

Telephone Number: _____ Fax Number: _____

Effective Date of Change: _____ Web Address: _____

School Director Name: _____ E-mail Address: _____

Has the owning corporation's names also changed? Yes No

Has there been a change of ownership? Yes No

Has there been a change of location? Yes No

If Yes, to any of the above, please explain. _____

Has the appropriate state agency/accrediting body been notified? Yes No

If Yes, attach a copy of the approval. If NO, please explain below:

Justify in narrative form on a separate sheet of paper the reason for the change of the name.

*I hereby certify that the institution will continue to operate in accordance with the applicable standards of the State Council of Higher Education for Virginia and that the change of name will not materially affect the thrust or the offerings of the institution. If using "college" or "university" or other words of similar meaning in the name, I have enclosed a company check in the amount of \$300, made payable to the **Treasurer of Virginia**.*

Signed: _____ Date: _____

Name (print): _____ Title: _____

(Chief On-Site Administrator)