Institutional Application for Religious Exemption

I. General Inform	ation	- Form must be typed. I	Handwi	ritten forms v	vill be returne	d unproce	essed.
Institution Name:							
Address:							
City:				State:		ZIP + 4:	
Phone Number:	()		Fax Numbe	er ()		
Website:							
Contact Person:							
	First		Last				MI
Address:							
City:				State:		ZIP + 4:	
Phone Number:	()		Email addre	ess:		
President's Name:				Title:			
Does the school ex	ist outs	side of Virginia? 🔲 Ye	s 🗌] No			
If yes, attach docun	nent pi	roviding information abo	out the	school.			
		nation zation recognized by th	e US [Dept. of Educ	cation, please	include a	a copy of notice of
accreditation.							
Accredited _ Yes	Na	me of Accrediting Agen	су				
Accredited 🗌 No		king Accreditation		🗌 No			
		ame of accrediting age	ncy				
Anticipated date of	initiai a	accreditation award					
III. Tax Exemptio	n Info	rmation					
		501© (3) tax exemption	n status	s? 🗌 Yes	□ No		
		IRS verification docun					
Federal Tax ID #							
IV. Ownership In	forma	tion					

IV. Ownership in						
Legal Name (Corporate or other) of Institution Owner:						
Address:						
City:			State:		ZIP + 4	
Phone Number:	()		Fax Number ()	
Ownership Contact	Perso	n:				
Phone Number:	()		Email address:		

Date institution was chartered or authorized to transact business in Virginia (attach copy of the Virginia State Corporation Commission certificate)

Date out-of-state institution was granted authorization to operate from the state where main campus is located (attach copy of the state authorization document)

Date SCHEV granted Name Acknowledgment

V. Enrollment Data

Estimate Annual Enrollment

VI. Proposed Credentials (i.e. Bachelor of Religious Studies)					
Mode of Delivery	Totally Online:	Onsite:		Hybrid: (combination of face-to-face and online instructions)	

VII. School Catalog- Please submit draft of the school catalog

VIII. Please provide a sample diploma/degree/credential that will be awarded to students upon completion of a program.

IX. Fees – A company or cashier's check in the amount of \$350, made payable to the Treasurer of Virginia, must accompany this application and be mailed to:
State Council of Higher Education for Virginia ATTN: Private Postsecondary Education section (PPE) 101 N. 14 th Street , 9 th Floor
Richmond, VA 23219
Religious Exemption Application Fee (non-refundable)