SCHEV James Monroe Building 101 North Fourteenth Street Richmond, Virginia 23219

STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA

Institutional Renewal Application for Religious Exemption

I. General Info	ormation - Form must be typ	ed. Handwritten for	ms will b	be returned unproces	sed.					
Institution Name	:									
Address:										
City:			State:		ZIP + 4					
Phone Number	()		Fax Number ()							
Website:		·								
Contact										
Person:										
	First	Last				MI				
Address:										
City:		s	State: ZIP + 4							
Phone Number	()	Email address	6							
President's										
Name			Title	9						
Does the school exist outside of Virginia? Yes No										
If yes, attach do	cument providing information	on about the scho	ol.							
II. Accreditation Information										
If accredited by an organization recognized by the US Dept. of Education, please include a copy of notice of accreditation.										
Accredited Yes Name of Accrediting Agency										
Accredited No Seeking Accreditation Yes No										
If seeking accreditation, name of accrediting agency										
Anticipated date of initial accreditation award										
III. Tax Exemption Information										
Does the Institution have 501© (3) tax exemption status? Yes No										
If yes, provide appropriate IRS verification documentation.										
Federal Tax ID #										

IV. Ownership	Informat	tion									
Legal Name (Corporate or other) of Institution Owner:											
Address:											
City:				State:		ZIP + 4					
Phone Number	()				Fax Number	()					
Ownership Cont	act Persor	N									
Phone Number	()		Email a	ddress							
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)											
V. Enrollment Data-Provide the number of graduates during the last five years, claiming Virginia residency.											
Total Number of Graduates											
VI. Credentials Offered (i.e. Bachelor of Religious Studies) and number of graduates from each											
		onal information									
Mode of Delive		otally nline:	Onsite:			(combination of structions)	face-to-face and				
VII. School Ca	talog- Pl	ease submit copy	v of the	school	catalog.						
VIII. Please proceeding of completion of		ample diploma/d m	egree/c	redenti	al that will be	e awarded to stu	udents upon				
completion of	a progra										
IX. Fees –Submit a company check, or cashier's check in the amount of \$350, made payable to the Treasurer of Virginia, must accompany this application and mailed to:											
State Council of Higher Education for Virginia											
ATTN: Private Postsecondary Education (PPE) 101 N. 14 th Street , 9 th Floor											
	Richmond, VA 23219										
Religious Exemption Renewal Fee (non-refundable)											