



**COVER PAGE**

**APPLICATION FOR NEW PROGRAM OF STUDY FOR PRIVATE BUSINESS  
AND VOCATIONAL SCHOOLS IN ILLINOIS**

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

Date of Submission: \_\_\_\_\_

Proposed Program/Course of Study: \_\_\_\_\_

Location(s): \_\_\_\_\_

Owner: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

The undersigned hereby verifies that the information provided in this application is true, complete, and correct to the best of his or her knowledge; and that he or she has the authority to submit this application on behalf of the proposed institution; and that he or she is an authorized representative of said institution.

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

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, AD., 20\_\_.

Notary Public: \_\_\_\_\_

The Illinois Board of Higher Education has the responsibility for granting approval to postsecondary institutions wishing to operate in the State of Illinois. Materials submitted in this application should represent a plan for the development of a proposed program of study or course offering and establish the conditions under which approval may be granted. The information requested in this application is in accordance with the rules to implement the "Private Business and Vocational Schools Act of 2012" (Public Act 97-650). The completed application should be submitted to:

PBVS Division  
Illinois Board of Higher Education  
1 N. Old State Capitol Plaza  
Suite 333  
Springfield, Illinois 62701