



KENTUCKY COMMISSION On PROPRIETARY EDUCATION

300 Sower Boulevard, Frankfort, Kentucky 40601
(502) 564-4185 www.kcpe.ky.gov

APPLICATION FOR A NEW PROGRAM

INSTRUCTIONS

1. This application must be typed or printed legibly and completed in its entirety.
2. This application and all supporting material must receive Commission approval prior to a school enrolling students in or beginning instruction in a new program.
3. This application and all supporting material must be submitted with the application fee in accordance with 791 KAR 1:025.
This fee is nonrefundable. All fees must be paid by check or money order made payable to the Kentucky State Treasurer. DO NOT SEND CASH.
4. Attach continuation sheets if more space is needed to provide information.
5. Attach a completed FORM FOR INSTRUCTIONAL STAFF AND KEY ADMINISTRATIVE PERSONNEL (PE-11) for each new instructor in the new program.
6. Refer to KRS 165A.360 and 791 KAR 1:025.
7. This completed application may be submitted to the Kentucky Commission on Proprietary Education either by mail to 300 Sower Boulevard, Frankfort, Kentucky 40601.

SCHOOL INFORMATION

School Name		Date	
Street Address	City	State	Zip Code
Telephone Number	Fax Number	Website Address	
Administrative Contact Person Name	Title		
Administrative Contact Person Address	City	State	Zip Code
Administrative Contact Phone Number	Fax Number	Email Address	

REQUESTED NEW PROGRAM INFORMATION

New Program Name

Objective of New Program

Is this Program offered at any other campus locations? If yes please explain and list state(s)



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Type of Program

- Diploma
- Certificate
- Undergraduate Certificate 1 – 2 Years
- Undergraduate Certificate 2 – 4 Years
- Undergraduate Diploma < 1 Year
- Undergraduate Certificate < 1 Year
- Evening
- Day
- Online Only
- Campus Only
- Blended
- Continuing Education
- Undergraduate Diploma 1 – 2 Years
- Undergraduate Diploma 2 – 4 Years
- Other
- Workshop

If Other, please explain.

New Program will be measured in Contact/Clock Hours Quarter Credit Hours Semester Credit Hours

Total Number of Semester/Quarter Credit	Total Number of Contact/Clock Hours	Tuition Rate Per Hour	Total Fees	Total Estimated Cost of Books & Supplies	Total Length Of Program

List each course in the new program including course title, course number, contact or credit hours, and Method of Delivery

Course Name or Title	Course Number	Contact or Credit Hours	Method of Delivery

Amount of capital to be used to support the new program.

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ACCREDITATION

List all accrediting agencies that accredit this school.

Accrediting Agency Name Date Accredited

Accrediting Agency Name Date Accredited

SUPPORTING MATERIAL

- A listing, marked Exhibit A, of course descriptions for each course in the new program, including the hours for each course.
- An equipment inventory, marked Exhibit B, identifying all additional equipment to be utilized for the new program.
- The instructional materials, marked Exhibit C, to be used for new program.
- A description, marked Exhibit D, of the space to be used for new program.

CERTIFICATION

I certify that the information provided on this application as submitted to the Kentucky Commission on Proprietary Education is true and correct in its entirety. In addition, I hereby pledge to follow all standards set out in KRS Chapter 165A and all rules and regulations set out in 791 KAR Chapter 1.

School Official Name Title School Official Signature