To request renewal of approval to offer distance education in New York State, institutions must complete the following steps:

1. Send the Renewal Application Fee

Mail the renewal application fee to NYSED.

The fee payment submission must include a NYSED payment form and a check for $17,000[[1]](#footnote-1) made out to the New York State Education Department. The payment and form should be mailed to:

New York State Education Department

 ATTN: OUT OF STATE APPLICATIONS

 Office of College and University Evaluation

 89 Washington Avenue, Room 960 EBA

 Albany, NY 12234

1. Submit Forms and Documentation

Upload the following materials to the institution’s Application Submission Folder:

* 1. NYSED Forms
		1. Institution Overview form
		2. Requirements and Terms of Approval form
	2. Financial Documents

Provide the following documents for the most recent fiscal year for the parent organization and for each subsidiary institution hosting an online program or course that will be offered in New York State:

* + 1. Signed audited financial statements.
		2. Single Audit or other Independent Auditor’s Reports relating to federal funding internal controls and compliance. If the institution is exempt from this reporting, provide an explanation and documentation.
		3. Form 990s, if applicable.
1. Send Notification

E-mail notification of submission.

Once all materials have been uploaded to the application submission folder, send an email to IHEauthorize@nysed.gov stating that the submission is complete and ready to be reviewed.

At the conclusion of the review, NYSED will notify applicants in writing that their application is either approved or disapproved. If an application is disapproved, NYSED will provide reasons for the disapproval in writing.

Application to Renew Approval to Offer Distance Education in New York State

Institution Overview & Attestation

An institution applying to the New York State Education Department (NYSED) to renew its approval to offer credit-bearing post-secondary distance education in New York State must complete the following forms and attest to the Requirements and Terms of Approval. NYSED reserves the right to request further information or conduct additional review for the purposes of evaluating the validity of the information provided herein.

Institution

|  |  |  |  |
| --- | --- | --- | --- |
| Institution Name: |  | OPEID or EIN: |   |

Has the institution has experienced any of the following conditions over the last twelve months? If yes, please attach a brief description of the changes.

|  |  |  |
| --- | --- | --- |
| Changes | Yes | No |
| Changes relating to the applicant institution's state authorization  | [ ]  Yes | [ ]  No |
| Changes relating to the applicant institution's institutional accreditation  | [ ]  Yes | [ ]  No |
| Changes in the membership of the leadership team or to faculty and staff with critical roles in the operation and oversight of distance education | [ ]  Yes | [ ]  No |
| Material changes relating to the institution's, or its highest domestic parent organization's, financial standing or control | [ ]  Yes | [ ]  No |
| Change of address | [ ]  Yes | [ ]  No |
| Changes in programs offered to New York-based students (submit an updated [Proposed Online Program Form](http://www.nysed.gov/college-university-evaluation/distance-education-application-process)) | [ ]  Yes | [ ]  No |

nEW yORK sTATE 12-Month Enrollment

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Period: | [ ]  July 1 – June 30 | [ ]  Other: |  | Graduate Enrollment: |  |
| Undergraduate Full-time: |   | Undergraduate Part-time: |   | Total Undergraduate: |  |

Primary Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: |  | Last Name: |   |
| Title: |   | Telephone: |   |
| E-mail: |   |  |  |

Secondary Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: |   | Last Name: |   |
| Title: |   | Telephone: |   |
| E-mail: |   |  |  |

Application to Renew Approval to Offer Distance Education in New York State

Requirements and Terms of Approval

By initializing each item below, the Chief Administrative Officer attests that the out-of-state higher education institution seeking authorization to provide distance education programs in New York:

|  |  |
| --- | --- |
|   | Is legally domiciled in a state other than New York or a United States territory, and hold proper authorization from such state/territory to offer degree-granting programs and confer degrees in such state/territory.  |
|   | Is accredited, with distance education approval, by a USDE recognized institutional accrediting body.  |
|   | Possesses a financial responsibility index score from U.S. Department of Education that is 1.5 or above.  |
|   | Affirms that the institution and its program meet and will continue to abide by the [Interregional Guidelines for the Evaluation of Distance Education](http://www.msche.org/publications/Guidelines-for-the-Evaluation-of-Distance-Education-Programs.pdf) as defined in §49-2.2(f) of Commissioner’s Regulation. |
|   | Agrees to be responsible for the actions of third-party providers used by the institution to offer distance education to New York State residents. |
|   | Agrees to notify NYSED of any adverse actions by its accreditor or any negative changes to its accreditation status. |
|   | Agrees to provide any data requested by NYSED for the purposes of periodic monitoring activities and/or responding to complaints. |
|   | Agrees to work with NYSED, other state agencies, and accreditors to resolve any complaints, and abide by the decisions of NYSED or other state agencies regarding complaint resolution, including but not limited to paying any refunds or fines and addressing any required corrective actions. |
|   | Agrees to notify all prospective and enrolled students in a course or program that customarily leads to professional licensure or certification, or which a student could reasonably believe leads to licensure or certification, that the institution is not able to recommend graduates for professional licensure in New York State, does not know whether the course or program leads to licensure requirements in New York State, and to provide the student with the contact institution for the appropriate state licensing or certification boards. |
|   | Agrees in cases where the institution cannot fully deliver the instruction for which a student has contracted, to provide a reasonable alternative for delivering instruction or reasonable financial compensation for the education the student did not receive. |
|   | Agrees to pay a non-refundable fee of $7,000 for the review and processing of the institution's application, and an annual administrative fee of $10,000 ($17,000 due upon initial application submission). |
|   | Agrees to cease and desist all operations, including offering any distance education programs to New York State residents, upon notification from NYSED that the institution has lost eligibility. |

Disclosure Authorization and Waiver of Liability

I hereby authorize any federal agency, state agency, accrediting body, or other non-governmental agency or organization, to provide the New York State Education Department (NYSED) with any and all information related to the institution’s quality, performance, capacity to operate effectively and in compliance with law, and track record of consumer protections, thereby releasing and discharging said agencies or organizations from any claims, liabilities, or damages whatsoever incurred in furnishing such information to NYSED. This includes, but is not limited to, information as to ongoing, current, or past reviews or investigations, and any information pertinent to the quality and character of the applicant institution, its governing officers, and its academic programs.

I certify that I am the applicant institution’s Chief Administrative Officer and on behalf of the institution I agree to the Requirements and Terms of Approval and attest that the information contained in this application is complete and accurate.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |   | Title: |   |
| Print Name: |   | Date: |   |

Application to Renew Approval to Offer Distance Education in New York State

Payment Form

Please include this form with your institution’s check when applying to NYSED for renewal of approval to offer distance education programs in New York State.

|  |  |
| --- | --- |
| INSTITUTION |  |
| Name: |   |
| OPEID or EIN: |   |
| FISCAL CONTACT |  |
| Name: |   |
| Telephone Number: |   |
| E-mail Address: |   |
| PAYMENT |  |
| Payable to:  | New York State Education Department |
| Check Number: |   |
| Check Amount: | $17,000 |

 Remit payment to: New York State Education Department

 ATTN: Out of State Distance Ed

 Office of College and University Evaluation

 89 Washington Avenue, Room 960 EBA

 Albany, NY 12234

1. The renewal application fee of $17,000 comprises the annual application review fee of $7,000 and an annual approval fee of $10,000. The annual application review fee is non-refundable. Should NYSED disapprove an application, the annual approval fee will be refunded. [↑](#footnote-ref-1)