STATE OF OHIO

BOARD OF CAREER COLLEGES AND SCHOOLS

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CHANGE OF OWNERSHIP CERTIFICATION

SCHOO	L NAME					
ADDRES	SS	NUMBER & STREET	CITY	STATE	ZIP	
NAME (OF PERSON	n to contact regarding questions ab	OUT CHANGE OF	OWNERSHIP:		
PHONE	NUMBER			EMAIL ADDRESS		
I hereby certify that the following statements are true and accurate:						
1.	Change	e of ownership will not disrupt scl	hool operatior	ns during the transition	nal period.	
2.	New school owners understand and agree that they are responsible for the following:					
	a. Maintaining and servicing all student records that were the responsibility of the prior owners of the school.					
	 Resolving all student complaints that were the responsibility of the prior owners and that were filed with the Board prior to the final approval of the change of ownership. 					
c. Honoring the terms of current student enrollment agreements, institutional schola for all students who were enrolled and taking classes at the time the change of ow place.						
SIGNAT	URE OF S	CHOOL DIRECTOR/NEW SCHOOL OWNER:				
PRINT I	NAME			DATE	<u> </u>	

ALL ITEMS MUST BE COMPLETED!

COMPLETION OF THIS FORM IS REQUIRED BY SECTION 3332 OF THE OHIO REVISED CODE, PRIOR TO THE CONSIDERATION BY THE BOARD OF CAREER COLLEGES AND SCHOOLS FOR AN INITIAL OR A RENEWAL OF A CERTIFICATE OF REGISTRATION. ALL QUESTIONS MUST BE ANSWERED AND ALL MATERIALS REQUESTED MUST ACCOMPANY THE APPLICATION (FAILURE TO DO SO WILL RESULT IN THE RETURN OF THE APPLICATION, WITHOUT ACTION, TO THE SCHOOL AND ANY FEES PAID ARE SUBJECT TO FORFEITURE).

PSR 0024 (Revised 10/11)