

Substantive Change Cover Sheet

1. Complete and submit a Substantive Change Cover Sheet with every substantive change submission.
2. Submit substantive changes as separate submissions except as permitted by policy.
3. Multiple changes in one submission, except as allowed by policy, will be returned.
4. An invoice will be issued, if required, when action is taken; no need to send payment until invoiced.

INSTITUTIONAL INFORMATION

INSTITUTION NAME (NO ABBREVIATIONS)	MAIN CAMPUS CITY + STATE (OR NON-U.S. COUNTRY)
IS THE INSTITUTION CURRENTLY ON REIMBURSEMENT FOR TITLE IV FEDERAL FUNDING? <input type="checkbox"/> Yes <input type="checkbox"/> No ▶ If "Yes" see policy for approval process requirements.	OFFICE USE

SUBSTANTIVE CHANGE RESTRICTION

1. Is the institution currently on Warning, Probation, or Probation for Good Cause?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Was the institution placed on Warning, Probation, or Probation for Good Cause on or after September 3, 2020, and subsequently removed from sanction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Is the institution currently under provisional certification for participation in federal financial aid programs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If ANY are "Yes" the institution is on SUBSTANTIVE CHANGE RESTRICTION. Refer to the <i>Substantive Change Policy and Procedures</i> for differential requirements and conditions.		

SUBMISSION INFORMATION

SUBSTANTIVE CHANGE TYPE (ONLY USE DESCRIPTIONS DEFINED IN POLICY)	SUBMISSION DATE	IMPLEMENTATION DATE
SUBSTANTIVE CHANGE DESCRIPTION		

OFF-CAMPUS INSTRUCTIONAL SITES /ADDITIONAL LOCATIONS RELATED TO THIS SUBMISSION

	Site Name	Address	City	State	ZIP Code	Country
1.						
2.						
3.						
4.						
5.						

PROGRAMS RELATED TO THIS SUBMISSION

	Program Name (to include discipline)	Credential (Diploma, Bachelor of Arts, etc.)	Instructional Level (undergrad/grad)
1.			
2.			
3.			
4.			
5.			

SUBMITTED

I certify the information on this form is correct and accurately represents the current status of the institution at the time of submission.

LIAISON or CEO NAME	EMAIL ADDRESS	<i>Suggest electronically signing with Adobe Acrobat when complete and before submitting (optional).</i>
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