



CHANGE OF OWNERSHIP OR CONTROL (SAA)

The school must complete this form and attachments if they desire to retain the approval of the school for veterans training after a change of ownership or control.

I. Basic Information

- A. School Name _____
- B. School Address _____
 City _____ State _____ Zip Code _____
- C. School Telephone Number (including area code) _____
- D. The school is applying for approval of the following courses of instruction, as described on the indicated page(s) of the school catalog, bulletin and/or brochure.

Name of Course of Instruction	Type	Length	Page(s)	Vocational or Educational Objective
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

II. Information About School Ownership

- A. The school is owned by (check whichever is applicable)
- a Proprietorship a Partnership a Corporation
 a Limited Partnership an Unincorporated Association
- B. If the school is owned by a proprietorship, partnership, limited partnership or an unincorporated association, list below the names and addresses of the persons having an interest of 10% or more in the proprietorship, partnership, limited partnership or unincorporated association and state the percentage of interest held by each person.

Name	Address	Percent of Interest
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- C. If the school is owned by a corporation or by a series of corporations, provide the information requested below for *each* corporation. If more than one corporation is involved, attach additional sheets as necessary.

Name of Corporation _____

Address of Corporate Home Office _____

City _____ State _____ Zip Code _____

Date of Incorporation _____ State of Incorporation _____

School Name _____

Names and Titles of Corporate Officers and Directors

III. School Record of Operation

A. On what date did the present owner obtain the school? _____

B. Has the school changed its name or address within the past year? Yes No

If the school has changed its name or address within the past year, list each change and effective date of each change.

School Name _____

1. From _____ (date), to _____ (date), the school name and address were _____

2. From _____ (date), to _____ (date), the school name and address were _____

C. Has the school, during the past year, entered into a consent order with the Federal Trade Commission or been notified of any official action which has been or will be taken against the school by any federal or state agency? Yes No

If the answer is "Yes," provide complete details on a separate sheet and attach to this form.

IV. Required VA Forms

Complete and submit with this form one signed copy of the following documents.

- A. VA Form 22-8794, Designation of Certifying Officials
- B. VA Form 27-1919, Conflicting Interests Certification for Proprietary Schools Only
- C. VA Form 27-8206, Veterans Administration Statement of Assurance of Compliance with Equal Opportunity Laws

Name of School Official

Title

Signature of School Official

Date