

RHODE ISLAND OFFICE OF THE POSTSECONDARY COMMISSIONER

INITIAL APPLICATION FOR CERTIFICATE OF APPROVAL FOR THE OPERATION OF A
PROPRIETARY SCHOOL IN RHODE ISLAND

Name of Applicant _____ Phone _____
Complete Address _____ E-mail _____
Name of Proposed School _____ Phone _____
Complete Address _____
Web Address for School _____ Fax _____
Primary Person to Contact _____ Phone _____
Complete Address _____ E-mail _____

A school seeking a certificate of approval from the Rhode Island Office of the Postsecondary Commissioner (RIOPC) to operate as a proprietary school in Rhode Island must observe the following procedures and must satisfactorily meet the [Standards for the Operation of Proprietary Schools](#) as set forth in *Section IV* of the [Regulations Governing Proprietary Schools in Rhode Island](#). The procedures are as follows:

1. Complete the pre-application process described in *Section III* of the *Regulations* and receive authorization from the RIOPC to apply for initial approval.
2. Make written application to the Commissioner of Postsecondary Education at least six months prior to the intended date on which operation will commence.
3. Submit a non-refundable application fee of \$2,000.00 payable to the RIOPC.
4. Submit the required bond with corporate surety payable to the RIOPC. The amount of the bond will be established by the commissioner. (Refer to *Standard 10.4* of the [Regulations](#) for information on how bonding levels are determined.) (See enclosed form.)
5. Submit a completed *Initial Application for Certificate of Approval* and copies of the supporting documents listed below. Additional application forms can be downloaded from <https://www.riopc.edu/page/proprietary>. Note: Documents requested below that were submitted in the pre-application process need not be re-submitted if there has been no change. However, potential schools may be asked to resubmit documents if they are not considered current by RIOPC staff. The following materials are to be supplied:
 - a. completed and notarized anti-discrimination compliance agreement (see form below);
 - b. names and titles of office holders and copies of organizational documents for the proposed school and for any entity, which is an owner of the proposed school;
 - c. copies of written policies pertaining to conflicts of interest (see sample below);

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- d. at least three letters of reference attesting to the good character and other qualifications of the officers and chief administrator (see [Regulations Standard 1: Owner, Officers and Personnel](#) for information on the type of letters required);
- e. personnel information for the proposed school chief administrator and all instructors (see form below);
- f. proposed catalogs, circulars, application forms and student enrollment agreement forms (see [Regulations Standard 14: School Catalogs and Related Materials](#), which lists the items to be included in these materials; refer to *Standards 1-13* for descriptions of the content expected for each item);
- g. schedule of proposed tuitions and fees;
- h. proposed calendar for a complete year, showing semesters or terms, normal enrollment dates, vacation periods and holidays (see form below);
- i. proposed curriculum for each program, showing content of courses to be taught and types of knowledge and skills to be learned (see form below);
- j. proposed certificate or diploma formats to be used;
- k. proposed forms to be used for record maintenance purposes;
- l. proposed advertising and other promotional materials;
- m. business plan for the school (download [Quick Marketing Plan](#));
- n. the latest audited financial statements for the school and financial projections for the period of the school's initial business plan prepared by a certified public accountant; the financial statements must be accompanied by a notarized statement signed by the owner (or in the case of a corporation or other entity its authorized fiscal representative) indicating that the financial information is true and correct (see form below);
- o. audited financial statements for the owners prepared by a certified public accountant;
- p. current annual tax return for the school and for each owner of the school;
- q. copies of any lease agreements pertaining to instructional or other physical facilities (see [Guidelines for Lease Agreements](#) below);
- r. certification from the deputy fire marshal, local building inspector and state health department that the school plant adheres to the regulations as established by these agencies (see form below);

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- s. letter from the state building commission certifying compliance with and accessibility under the Americans with Disabilities Act (ADA) and all applicable federal and state statutes;
 - t. a statement concerning any accreditation or approval granted the school by a recognized agency or association;
 - u. any other materials that the commissioner deems appropriate to the approval process.
6. Submit payment to external consultants, if necessary. *Note:* If deemed appropriate, external consultants may be selected by the RIOPC in consultation with the school to review the proposal either in whole or in part. The amount of the stipends to the consultants will be mutually agreed upon in advance and will be paid by the school at the conclusion of the review.
 7. The applicant will be notified by RIOPC of any deficiencies in the application.
 8. When the application is completed, RIOPC staff will arrange a site visit to inspect all proposed physical facilities.
 9. Upon completion of the review, RIOPC staff will present the results to the Commissioner of Postsecondary Education.
 10. The Commissioner of Postsecondary Education, acting upon the recommendation of RIOPC's staff, will submit a recommendation for action to the Council on Postsecondary Education.
 11. The Council must approve all initial applications prior to commencement of operations.

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ANTI-DISCRIMINATION COMPLIANCE AGREEMENT

The applicant agrees that no person shall, on the basis of race, color, religion, sex, physical/mental handicap, age, or national origin, be excluded from participation in, be denied the benefits of, or be subject to discrimination by this institution.

I hereby swear and affirm that the information contained herein is true and correct to the best of my knowledge and all supporting statements and substantive documents are true and correct.

Name of School _____

Name of Officer and/or Owner _____

Signature of Officer and/or Owner

State of _____)

) SS

County of _____)

(official capacity)

Subscribed and Sworn before me this _____ day of _____, 20 ____.

Notary Public

My Commission Expires: _____

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FINANCIAL STATEMENTS NOTARIZATION FORM

This is to certify that the enclosed financial statements for

Name of school or corporation

for the period _____
period covered by financial statements

are true and correct and were prepared by

name of accountant and firm; must be C.P.A.

signature of owner

Subscribed and sworn before me this _____ day of _____, 20_____.

Notary Public

My Commission expires _____

BOND of PROPRIETARY SCHOOL
to the
RHODE ISLAND OFFICE OF THE POSTSECONDARY COMMISSIONER

Know All Persons by These Presents:

That We _____
(hereinafter called the Principal), as Principal, having an office at _____
in the State of Rhode Island, and _____
(hereinafter called the Surety), as Surety, a corporation organized under Laws of the State of _____

and duly admitted to transact the business of Surety in the State of Rhode Island, are held and firmly bound unto the Office of the Postsecondary Commissioner of the State of Rhode Island and Providence Plantations in the penal sum of (\$ _____), to be paid to the Office of the Postsecondary Commissioner of the State of Rhode Island and Providence Plantations, for the benefit of any person referred to in the conditions of this bond for which payment, well and truly made, we bind ourselves, our heirs, executors, successors and assigns, jointly and severally, firmly by these presents.

The conditions of this obligation are such, that:

Whereas, the said Principal has applied to the Office of the Postsecondary Commissioner, State of Rhode Island and Providence Plantations for approval to operate a proprietary school in said State:

Proceeds of this bond shall be available to reimburse students for their loss of monies paid for tuition, fees, charges for courses, materials and/or equipment occasioned by the principal's failure to perform any of its obligations under any contract for instruction or training and/or its breach of or noncompliance with any laws, regulations or standards pertaining to the approval issued to the principal by the Office of the Postsecondary Commissioner, which said failure, breach or noncompliance shall occur during the term of this bond. To the extent that the principal otherwise accounts for such losses to said students then its obligations under this bond shall be satisfied, otherwise such obligations shall remain in full force and effect.

The total aggregate liability under this bond is limited to the sum of \$ _____
This bond shall take effect on and as of _____, 20____
And shall continue in full force until _____, 20____
Signed and sealed this ____ Day of _____, 20____

Witness

Principal

Witness

Surety

INSTRUCTIONS FOR EXECUTING BOND

1. This bond must be executed by an insurer licensed by the Rhode Island Department of Business Regulation to conduct business and transact surety in Rhode Island, through an agent who is duly authorized by law.
2. There must be on file with the Commissioner of Postsecondary Education evidence that every such person signing the bond on behalf of the Surety, or on behalf of a corporate principal, is authorized to sign the same at the time of such signature.

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3. Signatures of all individuals executing the bond (both Principal and Surety) must be acknowledged before a notary public of the State of Rhode Island; or by an officer authorized to take acknowledgements of deed in another jurisdiction, together with a certificate evidencing the authority of such officer.

Unless these instructions are followed literally the bond will not be accepted.

STATE OF _____

ss.

COUNTY OF _____

Personally appeared before me _____ and _____ to me known and know to be the _____ and _____ of an the persons who executed the foregoing instrument in behalf of _____, one of the parties to the foregoing instrument; and each of them acknowledged said instrument by him signed to be his free act and deed as such officer and the free act and deed of said of _____.

Notary Public

STATE OF _____

ss.

COUNTY OF _____

Personally appeared before me _____ and _____ to me known and know to be the _____ and _____ of an the persons who executed the foregoing instrument in behalf of _____, one of the parties to the foregoing instrument; and each of them acknowledged said instrument by him signed to be his free act and deed as such officer and the free act and deed of said of _____.

Notary Public

STATE OF _____

ss.

COUNTY OF _____

Personally appeared before me to me known and known by me to be the person executing the foregoing instrument as Principal and he acknowledged the same to be his free act and deed.

Notary Public

Any Surety Company duly authorized to transact business in the State of Rhode Island may become surety of this bond.

FIRE INSPECTION PROCEDURES

As part of the approval process of the initial application for your school, it is required that an inspection of the school plant be conducted by the local Deputy Fire Marshal and that a *Certificate of Inspection* be submitted to the Rhode Island Office of the Postsecondary Commissioner.

In an attempt to expedite this portion of the approval process, the following procedural steps are recommended:

1. Contact the local Deputy Fire Marshal and arrange for an inspection.
2. Have on hand, the day of inspection, any documents relating to variance requests that were submitted to the Fire Safety Code Board of Appeals and Review and which would have an effect on the school's compliance with the provisions of the Fire Safety Code.
3. Insure that a copy of the completed fire inspection certificate is sent to the Rhode Office of the Postsecondary Commissioner, 560 Jefferson Boulevard, Warwick, RI 02886 (a copy should be filed with the Deputy Fire Marshal, and the original should be retained for your records) (see form below).
4. In the case of a school not complying with the provisions of the Fire Safety Code, the authorized agent of the school should:
 - (a) find out what the problems are and obtain a list of the deficiencies;
 - (b) determine from the local Deputy Fire Marshal what action must be taken by the school in order to comply with the Code;
 - (c) ask the local Deputy Fire Marshal for assistance in whatever action must be taken;
 - (d) establish a date for re-inspection of the school and reissuance of an inspection certificate;
 - (e) submit a copy of the inspection certificate to the Rhode Island Office of the Postsecondary Commissioner, 560 Jefferson Boulevard, Warwick, RI 02886 (a copy should be filed with the Deputy Fire Marshal, and the original should be retained for your records) (see enclosed form).
5. If further interpretation of the Fire Safety Code, or procedures related to requesting permission to file for a variance from the Code, is required, contact the local Deputy Fire Marshal or the Office of the State Fire Marshal (222-2335).

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DEPUTY FIRE MARSHAL'S CERTIFICATE OF INSPECTION

Approval Period: _____

Name of School

Complete address of school

1. Maximum number of students regularly in the school building at one time _____.

2. My signature below certifies that the above named school plant has been inspected in accordance with [Title 23, Chapter 28](#) (Fire Safety Code) of the *General Laws of Rhode Island, 1956, as amended*, and I find the school plant:
 - a. Complies with Fire Safety Code _____
 - b. Has filed a variance _____
 - c. Does not comply with Fire Safety Code _____

The following corrections over and above any variance must be made:

(Attach additional pages if needed.)

Typed Name of Person Making Inspection

Telephone Number

Title or Rank

Date of Inspection

Signature of Person Making Inspection

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BUILDING INSPECTOR'S CERTIFICATE OF INSPECTION

Approval Period: _____

Name of School

Complete address of school

1. Maximum number of students regularly in the school building at one time _____.

2. My signature below certifies that the above named school plant has been inspected, and I find the school plant to be:
 - a. Structurally safe and sound _____

 - b. Structurally unsafe and/or unsound _____

The following corrections must be made before a structurally safe and sound rating can be given by the Building Inspector:

(Attach additional pages if needed.)

3. Comments

Signature of Inspector

Telephone Number

Appointed by town/city

Date of Inspection

HEALTH ENVIRONMENT CERTIFICATE OF INSPECTION

Approval Period:

Name of School

Complete address of school

1. Maximum number of students regularly in the school building at one time_____.

2. Based on an inspection of the following areas: lighting, food service, housekeeping, insect/rodent control, water supply, temperature, sewage disposal, lavatories/toilets, showers, drinking fountains, and solid waste disposal, my signature below certifies that the above named school plant has been examined and warrants the following rating:
 - a. Satisfactory _____
 - b. Provisional _____
 - c. Unsatisfactory _____

The following corrections must be made before a satisfactory rating can be given by the Health Department:

(Attach additional pages if needed.)

3. Comments

Date of Inspection

Location of Reporting Health Department Field Office

Name of Inspector

Health Department Official's Signature

PROGRAM REVIEW GUIDELINES

STANDARDS

One of the most important areas covered by the [Regulations Governing Proprietary Schools in Rhode Island](#) relates to the soundness of the educational programs that are offered.

Instructions

In order for a proprietary school education program to be approved by the Council on Postsecondary Education, it must meet the following standards:

1. The objectives of the program must be clearly stated.
2. The curriculum for the program must reflect current vocational competencies and current occupational practices.
3. The curriculum of the program must be logically and sequentially organized.
4. Laboratory and classroom instruction for the program must be appropriately integrated.
5. Required textbook(s) for the program must adequately complement and supplement the curriculum.
6. Entrance requirements for the program must be appropriate for the curriculum.
7. An appropriate system for evaluating student progress in the program must be in place.
8. Completion requirements for the program must be such that each student can demonstrate the acquisition of the vocational and/or technical competencies that are taught in the program.
9. Overall, the program must be educationally sound in structure, organization, and content.

PROGRAM INFORMATION

Program Title	Length of Program in Hours*	Length of Program in Weeks	Reg. Fee	Tuition	Other Charges	Total Cost

* Clock or credit hours, please specify.

1. Complete this section **ONLY** if you are requesting approval in **clock hours**.

___Day ___Evening? Maximum class size: _____
 Total hours in classroom lecture? _____ Total hours in lab/shop? _____
 Clock hours per week _____ x _____ weeks in program = _____ total clock hours in program.

Submit on a separate sheet the actual daily schedule (name the days), including beginning and ending times of all classes, breaks, lunch, and study periods.

2. Complete this section **ONLY** if you are requesting approval in **credit hours**.

___Day ___Evening Maximum class size _____
 Credit hours (check one): _____Semester _____Trimester _____Quarter
 Length in weeks of semester/trimester/quarter: _____
 Total credit hours in program: _____
 Total credit hours in: classroom/lecture _____ lab _____
 Shop _____ internship _____
 Classroom/lecture: hours per day _____ days per week _____
 Lab: hours per day _____ days per week _____
 Shop: hours per day _____ days per week _____
 Internship: hours per day _____ days per week _____
 Externship: hours per day _____ days per week _____

Submit on a separate sheet the actual daily schedule (name the days), including beginning and ending times of all classes, breaks, lunch, and study periods.

3. Program objective:

4. Entrance requirements:

5. Procedures for granting credit for previous training or experience:

6. Graduation/completion requirements:

7. Student evaluation procedures:

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9. List the required readings for each course (by author, title and publication date).

Author	Title	Publication Date

10. List the equipment that will be purchased for each program, including quantity and manufacturer for each item of equipment.

Equipment	Manufacturer	Quantity

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SCHOOL CALENDAR

Approval Period: _____

CLASS SCHEDULE		VACATION PERIODS	
Start Date	End Date	From	To

Daily Hours of Operation:

Days: _____

Evenings: _____

Holidays Observed *(Please check all that apply)*

- _____ Labor Day
- _____ Columbus Day
- _____ Election Day
- _____ Veterans Day
- _____ Thanksgiving Day
- _____ Christmas Day
- _____ New Year's Day
- _____ Martin Luther King Day
- _____ Lincoln's Birthday
- _____ Washington's Birthday
- _____ Memorial Day
- _____ Independence Day
- _____ Victory (VJ) Day
- _____ Others _____

**PERSONNEL INFORMATION FOR SCHOOL OWNERS,
CHIEF ADMINISTRATORS & FACULTY**

Respondent's Name: _____ Date: _____

Permanent Address: _____

_____ Telephone Number: _____

School Name: _____

Position at School: _____

License No. (if applicable): _____

Expected date of Employment: _____ Full-time _____ Part-time _____

Primary Responsibility or Subject to be taught: _____

Other Responsibilities _____

Complete Record of Respondent's Education:

	Name of School	Location of School <i>City, State</i>	Course of Study / Major	Dates of Attendance (Beginning & Ending)	Diploma or Certificate Earned
High School or Academy					
Trade or Technical School					*
College or University**					*

***Submit copies of degree, certificate or diploma**

****College graduates must also submit copies of transcripts**

If additional space is required to respond fully, please provide the information on a separate attachment and indicate which questions you are answering.

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3. To what professional organizations do you belong? _____

4. Employers during the last 10 years:

Dates Employed Month & Year (To / From)	Position Held / Title	Name of Company	Location of Employer <i>City, State</i>

5. Have you ever been convicted of any violation of law other than a minor traffic violation?
 Yes _____ No _____. If yes, give date(s), place(s) of conviction, charge(s) and disposition of each case.

6. Have you ever had a diploma, credential, license or certificate denied, revoked or suspended?
 Yes _____ No _____. If yes, explain fully. _____

7. Have you ever been found guilty of, pleaded guilty to, or entered a plea of *nolo contendere* to a charge of immoral conduct? Yes _____ No _____. If yes, explain fully. _____

8. Have you ever been dismissed from any position for immoral or unprofessional conduct?
 Yes _____ No _____. If yes, explain fully.

9. Affidavit by Respondent

I hereby certify that the information given on these pages and on any attached statements is true and correct to the best of my knowledge.

Date

Signature

10. Affidavit by Chief School Administrator

I hereby certify that the information given on these pages and on any attached statements is true and correct to the best of my knowledge.

Date

Signature & Title

If additional space is required to respond fully, please provide the information on a separate attachment and indicate which questions you are answering.

PLEASE DO NOT WRITE BELOW THIS LINE

Date Received: _____ Date Approved _____

Date Reviewed: _____ Reviewed by: _____

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OWNERSHIP INFORMATION

1. Proposed type of business ownership: (please check one)
- a. Corporation _____ c. Partnership _____
- b. Proprietorship _____ d. Other _____

If Other, please indicate type of ownership: _____

2. Owner(s): (Applicable to proprietorship or partnership)

Name	Home Address
_____	_____
_____	_____
_____	_____

3. Officers and Chief Administrators: (Applicable to corporation)

Name	Title	Home Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. If corporation, please have corporate papers submitted from Secretary of State.

5. Name of proposed school chief administrator: _____

6. If the school chief administrator is not a school owner or principal stockholder or a corporate officer, please state, using a separate sheet of paper, the extent of authority that the school chief administrator will have in the operation of the school.

7. If you are the owner, have you ever owned or been employed by a proprietary school in this state or any other state? Yes _____ No _____ If yes, explain. _____

8. If you are going to be the chief administrator of the proposed school, have you ever been a chief administrator of a proprietary school in this state or any other state? Yes ___ No _____
If yes, explain. _____

9. If school premises are leased, submit a copy and state the terms of the lease. Use a separate sheet of paper. (See [Guidelines for Lease Agreements.](#))

10. Is any part of the school plant used for other than school purposes?
Yes _____ No _____ If yes, describe fully. _____

If additional space is required to respond fully, please provide the information on a separate attachment and indicate which questions you are answering.

REFERENCE SHEET

Please submit letters of reference from each of the individuals listed below. The references must attest to the good character and professional competency of each person. Of the three reference letters, two from professional sources are preferable. References should describe the nature and length of their relationship with the subject of the letter. If the proposed school is a partnership or corporation, each partner or corporate member must submit three (3) references.

OWNER'S REFERENCES

Name _____
Address _____
Position _____
Phone _____
E-mail _____

Name _____
Address _____
Position _____
Phone _____
E-mail _____

Name _____
Address _____
Position _____
Phone _____
E-mail _____

CHIEF ADMINISTRATOR'S REFERENCES

Name _____
Address _____
Position _____
Phone _____
E-mail _____

Name _____
Address _____
Position _____
Phone _____
E-mail _____

Name _____
Address _____
Position _____
Phone _____
E-mail _____

A SAMPLE CONFLICT-OF-INTEREST POLICY FOR OWNERS & INSTITUTIONAL OFFICERS

1. Scope. The following statement of policy applies to the owners and to all officers of _____. It is intended to serve as guidance for all persons employed by the school in positions of significant responsibility including *(define categories of positions)*.

2. Fiduciary Responsibilities. Owners, officers and employees of the school serve the public trust and have a clear obligation to fulfill their responsibilities in a manner consistent with this fact. All decisions of the owners, officers of the administration and faculty are to be made solely on the basis of a desire to promote the best interests of the institution and the public good. The integrity of _____ must be protected and advanced at all times.

Men and women of substance inevitably are involved in the affairs of other institutions and organizations. An administration and faculty cannot consist of individuals entirely free from at least perceived conflicts of interest. Although most such potential conflicts are and will be deemed inconsequential, it is everyone's responsibility to ensure that the school is made aware of situations that involve personal, familial, or business relationships that could be troublesome for the school. *Thus, the school requires each owner and institutional officer annually to (1) to review this policy; (2) to disclose any possible personal, familial, or business relationships that reasonably could give rise to a conflict involving the school; and (3) to acknowledge by his or her signature that he or she is in accordance with the letter and spirit of this policy.*

3. Disclosure. Each owner and officer is requested to list on this form *only those substantive relationships* that he or she maintains (or family members maintain) with organizations that do business with the school or otherwise could be construed to potentially affect their independent, unbiased judgment in light of his or her decision-making authority or responsibility. [Sample form appears on next page.] Such information, including information provided on this form, shall be held in confidence except when, after consultation with you, the school's best interests would be served by disclosure.

The following definitions are provided to help you to decide whether a relationship should be listed on this form:

Business Relationship: One in which an owner, officer, or a member of his or her family as defined below serves as an officer, director, employee, partner, trustee, or controlling stockholder of an organization that does substantial business with the school.

Family Member: A spouse, parents, siblings, children, or any other relative if the latter resides in the same household as the trustee or officer.

Substantial Benefit: When you or a member of your family (1) are the actual or beneficial owner of more than five percent of the voting stock or controlling interest of an organization that does substantial business with the school or (2) have other direct or indirect dealings with such an organization from which you or a member of your family benefits directly, indirectly, or potentially from cash or property receipts totaling \$10,000 or more annually.

4. Restraint on Participation. Owners or officers who have declared or been found to have a conflict of interest shall refrain from participating in consideration of proposed transactions, unless for special reasons the administration requests information or interpretation.

A SAMPLE DISCLOSURE FORM FOR OWNERS AND INSTITUTIONAL OFFICERS

Please complete the following and return this form in the envelope provided.

1. Are you aware of any relationship with the school between yourself or a member of your family as defined by the letter or spirit of this policy that may represent a conflict of interest?

_____ Yes _____ No

If yes, please list or elaborate such relationships and the details of annual or potential financial benefits as you can best estimate them.

2. Did you or a member of your family receive, during the past 12 months, any gifts or loans from any source from which the school buys goods or services or otherwise has significant business dealings?

_____ Yes _____ No

If yes, please list such loans or gifts, their source, and their approximate value.

I certify that the foregoing information is true and complete to the best of my knowledge.

(Name, date and signature).

Other "Code of Ethics" statements that could be included:

1. The Director/Owner/Officer will not abuse his/her position to take advantage of students.
2. The Director/Owner/Officer will avoid investments/associations that interfere with the best interests of the school and its students.

GUIDELINES FOR LEASE AGREEMENTS FOR INSTRUCTIONAL AND OTHER PHYSICAL FACILITIES IN PROPRIETARY SCHOOLS OPERATING IN RHODE ISLAND

When a proprietary school operating under the Council on Postsecondary Education [Regulations Governing Proprietary Schools in Rhode Island](#) makes arrangements with another entity to provide instructional space or other physical facilities, a lease agreement signed by the chief executive officer of each of the entities (i.e., the school and the provider of space) must be provided to the Council on Postsecondary Education. The lease agreement must clearly outline all aspects of the arrangement, the services, equipment and facilities to be provided by each entity, and the effective dates of the agreement.

SCHOOL APPLYING FOR INITIAL APPROVAL: As part of the application packet, a school applying for initial approval must provide a copy of the lease agreement and copies of certifications from the deputy fire marshal, the local building inspector and the state health department* that the school plant adheres to the regulations as established by these agencies. It must also supply certification from the state building commission regarding accessibility under the Americans with Disabilities Act (ADA).

APPROVED SCHOOL CHANGING PHYSICAL LOCATION: In addition to supplying a copy of the lease agreement, an approved school must provide copies of fire, building, health* and ADA certifications and receive prior approval from Commissioner of Higher Education before making any change in physical location. (See the section on *Prior Approval for Changes* in the regulations.)

STANDARD 9: SCHOOL FACILITY: When the lease agreement is in effect, all of the provisions of the regulations must continue to be met. In particular, the instructional location must meet all the requirements of *Standard 9: School Facility*.

CONTENTS OF LEASE AGREEMENTS:

- **DESCRIPTION OF PHYSICAL FACILITIES.** Describe in detail the classroom and/or laboratory spaces and other physical resources to be supplied (e.g., restrooms, break rooms, parking facilities).
- **INSTRUCTIONAL RESOURCES.** Describe any instructional equipment, instructional support personnel, and library facilities, to be provided by the lessor at the instructional site.
- **EFFECTIVE DATES OF THE LEASE AGREEMENT.** Describe the effective dates of the agreement, renewal provisions and other related matters.
- **OTHER PROVISIONS.** The school may also wish to consult its legal counsel (or other appropriate professional) to ensure that all of the provisions in the lease agreement are correct and complete.

NOTE: A site visit by RIOPC staff is required before any instructional site or physical facility will be approved.

* Inspections by the Rhode Island Department of Health will be dependent upon the availability of inspectors. However, some programs (e.g., cosmetology programs) require health inspections. Schools should check with the RIOPC to determine whether a health inspection is required.