**LETTER OF INTENT**

**Please answer each question. If additional information is required to explain the intent to operate in Arizona, please complete question 10.**

1. Name, Title, Address, phone number and email address to which communication can be established.
2. Name under which the postsecondary institution will operate:
3. Name of the owner or executive of the postsecondary entity as applicable:
4. for profit: corporation name, all individual owners, partners or shareholder with 20% or more ownership or control, or
5. non-profit: Board of Trustees.
6. Is the postsecondary institution currently operating at this time? If yes, list each state of operation and current status of licensure:
7. Has your postsecondary entity or have any persons named as owners, partners or shareholders ever been issued a school license in the state of Arizona? If yes, please specify circumstances.
8. Will the school be domiciled in Arizona, have a physical facility in Arizona and be primarily recruiting in Arizona? Explain.
9. Does the institution plan to offer its programs online, campus based or hybrid?
10. List the vocational programs and/or degree programs you plan to offer in Arizona. Include the complete degree designation for each degree program.
11. Is the educational institution accredited? If so, list name of each accrediting body and confirm the institution is in good standing.
12. Please include any additional information regarding your educational intentions, as you deem appropriate and/or necessary. Attach additional sheets as necessary.

**RETURN THIS FORM VIA EMAIL to** [**Keith.Blanchard@azppse.gov**](mailto:Keith.Blanchard@azppse.gov)

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