

To receive an application to apply for initial degree-granting authority or an initial operating license in Delaware, please email the following information to IHE@doe.k12.de.us :

1. Your name and title

Click here to enter text.

2. Name of Institution of Higher Education

Click here to enter text.

- 3. Mailing address of the Institution Place of operations for this Institution Click here to enter text.
- 4. Your email address

Click here to enter text.

5. Whether the institution has Incorporated or is seeking to incorporate in Delaware

If the Institution has incorporated or is seeking to incorporate in Delaware, whether the Institution wishes to incorporate with the power to confer academic and honorary degrees

Click here to enter text.

6. Whether the Institution has established or is seeking to establish a physical location (campus, satellite, extension campus) in Delaware

If the Institution has not established or is not seeking to establish a physical location in Delaware, whether the Institution will be serving 10 or more students in Delaware through an internship, residency, clinic, or other related program

Click here to enter text.

7. State or jurisdiction in which the Institution has degree-granting authority, if applicable

Click here to enter text.

 Whether the Institution holds accreditation from an institutional, programmatic and/or faith-based accrediting agency that appears on the list of recognized accrediting agencies published by the United States Department of Education.

Click here to enter text.

 Whether the Institution intends to offer an education preparation program. For information on applying for approval of an educator reparation program, contact Robert Grey at <u>robert.grey@doe.k12.de.us</u> or 302-735-4262

Click here to enter text.

10. Whether the Institution is approved by the National Council for State Authorization Reciprocity Agreements (SARA) to offer distance education courses and programs

Click here to enter text.