



# KENTUCKY COMMISSION On PROPRIETARY EDUCATION

Capital Plaza Tower, Room 302, 500 Mero Street, Frankfort, Kentucky 40601  
(502) 564-4185 [www.kcpe.ky.gov](http://www.kcpe.ky.gov)

## APPLICATION TO REVISE AN EXISTING PROGRAM FOR 25% OR MORE

### INSTRUCTIONS

1. This application must be typed or printed legibly and completed in its entirety.
2. This application and all supporting material must be submitted with the application fee in accordance with 791 KAR 1:025. This fee is nonrefundable. All fees must be paid by check or money order made payable to the Kentucky State Treasurer. DO NOT SEND CASH.
3. Attach continuation sheets if more space is needed to provide information.
4. Refer to KRS 165A.330(1), KRS 165A.340(3),(7), KRS 165A.360(1), KRS 165A.370(1)(q), KRS 165A.400 and 791 KAR 1:020 and 791 KAR 1:025.
5. This completed application may be submitted to the Kentucky Commission on Proprietary Education by mail to Capital Plaza Tower, Room 302, 500 Mero Street, Frankfort KY 40601.

### SCHOOL INFORMATION

School Name		Date	
Street Address	City	State	Zip Code
Telephone Number	Fax Number	Website Address	
Administrative Contact Person Name	Title		
Administrative Contact Person Address	City	State	Zip Code
Administrative Contact Phone Number	Fax Number	Email Address	

### ACCREDITATION

List all agencies accrediting this school.

Accrediting Agency Name	Date Accredited
Accrediting Agency Name	Date Accredited

### PROGRAM INFORMATION

The following are being revised for this program. Check all that apply.

Program Name	Credit Hours
Course Name(s)	Program Length
Curriculum Content	Other
Contact/Clock Hours	

Method of Delivery

- Onsite  
 Online  
 Other  
 Blended

If Other, please explain.

Name of Program



# KENTUCKY COMMISSION On PROPRIETARY EDUCATION

Capital Plaza Tower, Room 302, 500 Mero Street, Frankfort, Kentucky 40601  
 (502) 564-4185 [www.kcpe.ky.gov](http://www.kcpe.ky.gov)

## APPLICATION TO REVISE AN EXISTING PROGRAM FOR 25% OR MORE

Revised Name of Program

Type of Program      Workshop  
                                  Continuing Education Credit  
                                  Undergraduate Certificate < 1 Year  
                                  Undergraduate Diploma < 1 Year  
                                  Undergraduate Certificate 1 – 2 Years  
                                  Undergraduate Diploma 1 – 2 Years  
                                  Undergraduate Certificate 2 - 4 Years  
                                  Undergraduate Diploma 2 - 4 Years

Associate of Arts  
 Associate of Science  
 Associate of Applied Science  
 Associate of Occupational

If Other, please explain.

### COURSE INFORMATION

List all courses in the current program first, and then list all the new courses in the revised program. Indicate by using an asterisk, each course revision and whether such revision is an addition, deletion or a revision of name or title from the currently approved program.

Course Number	Course Name or Title	Current		Revised	
		Contact/Clock Hours	Credit Hours	Contact/Clock Hours	Credit Hours

### CALCULATION OF PROGRAM REVISION

Type of Hours <input type="checkbox"/> Contact/Clock <input type="checkbox"/> Quarter Credit <input type="checkbox"/> Semester Credit	Current	Revised	Percent Revised
Number of Hours For Added Courses			
Number of Hours for Deleted Courses			
Number of Courses with Revision of Name or Title			
Program Length in Weeks			
Cost of Program			

### SUPPORTING MATERIAL

- ⑧ A list, marked Exhibit A, of any revised performance objectives, indicating skills and understanding student(s) will have upon completion of this revised program.
- ⑧ An equipment inventory, marked Exhibit B, of new or different equipment to be utilized by the student(s) to successfully complete this revised program.
- ⑧ A list, marked Exhibit C, of new instructors and a complete FORM FOR INSTRUCTIONAL STAFF & KEY ADMINISTRATIVE PERSONNEL (PE-11), for each new instructor of this revised program.





## KENTUCKY COMMISSION On PROPRIETARY EDUCATION

Capital Plaza Tower, Room 302, 500 Mero Street, Frankfort, Kentucky 40601  
(502) 564-4185 [www.kcpe.ky.gov](http://www.kcpe.ky.gov)

---

### APPLICATION TO REVISE AN EXISTING PROGRAM FOR 25% OR MORE

#### CERTIFICATION

I certify that the information provided on this application as submitted to the Kentucky Commission on Proprietary Education is true and correct in its entirety. In addition, I hereby pledge to follow all standards set out in KRS Chapter 165A and all rules and regulations set out in 791 KAR Chapter 1.

---

School Official Name

Title

---

School Official Signature

Date