



## Change of Ownership Application

The Change of Ownership Application must accompany an Application for Initial Authorization when a change of Institutional ownership is underway. Per [AS 14.48.070\(c\)](#), the Authorization to operate shall be issued to the owner, or governing body, of the applicant Institution, and shall be nontransferable. Per [20 AAC 17.040\(c\)](#), an Institution with an Authorization to operate shall notify the Commission before entering into contracts or negotiations related to the sale of the Institution.

**Instructions:** At least 30 days before the effective date of a change of ownership of an Institution, the new owner shall submit an application for Initial Authorization, a Change of Ownership Application, and an application fee.

**\*Submit all applications and supporting materials to [eed.acpe-ia@alaska.gov](mailto:eed.acpe-ia@alaska.gov) via [ZendTo](#).** Upon determination that the application is complete, Commission staff shall place the application on the agenda for the next Commission meeting.

**NOTE:** Full text of the laws governing the delivery of postsecondary education in Alaska is contained in [Alaska Statute 14.48](#) and the [Alaska Administrative Code, Title 20, Chapter 17](#). All institutions should become familiar with those statutes and regulations.

### II. General Information:

Institution Name: \_\_\_\_\_

Individual Completing Form: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### II. Checklist: Please complete checklist 1-5

Check of Materials		
1	<input type="checkbox"/>	Completed Application for Initial Authorization.
2	<input type="checkbox"/>	A description of any changes to be made at the Institution as a result of the change in ownership.
3	<input type="checkbox"/>	A detailed timeline regarding the change in ownership, including the effective date of the changes.
4	<input type="checkbox"/>	A statement of the assets and obligations that will be transferred.
5	<input type="checkbox"/>	A statement of how student records will be transferred to the new ownership or surrendered to the Commission.

### III. Certification:

I certify that all information listed in the checklist above and included in this application is complete and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Owner or Administrative Official)

Printed Name of Administrative Official: \_\_\_\_\_

Title of Administrative Official: \_\_\_\_\_