



CHANGE OF OWNERSHIP (PROPRIETARY)

Submit within 14 days of the change of ownership.

School Name _____

New Owner _____

Address _____

City, State, Zip _____

Telephone _____

Legal structure (corporation, sole proprietor, etc.)

Previous Owner _____

Address and Telephone _____

List of all individuals with 10% or more of the school's equity.

Name _____

Title _____ Percentage _____

Name _____

Title _____ Percentage _____

Name _____

Title _____ Percentage _____

(Add additional pages if necessary)

Current Director(s) _____



Former director(s) _____

Number of students at time of sale _____

Number of current students _____

I certify that to the best of my knowledge and belief, the information provided herein and attached hereto is accurate and correct.

I certify that the ownership and management have read and thereby understand the Standards for Accreditation and all supporting documents regarding policies and procedures.

I certify that the ownership and management assume all responsibility and liability for contractual and refund obligations to all present and past students.

Owner's Name _____

Signature _____

Date _____

Attachments to accompany Form D.4:

_____ Processing fee (Payable to COMTA) – See Appendix A.2, Fee Schedule