

## OOS RENEWAL

### MARYLAND HIGHER EDUCATION COMMISSION Application for Renewal Approval for Out-of-State Degree-Granting Institutions to Operate in Maryland

**Please Note:** A separate application form must be completed and submitted with all supporting documentation for each proposed location in Maryland. If an additional, new location is being proposed, an *Application for Renewal of Approval* must be submitted for that location.

#### PREVIOUSLY APPROVED LOCATION IN MARYLAND.

Please provide the complete mailing address.

#### PROPOSED START DATE OF CONTINUED OPERATION.

Applications should be submitted at least 5 months prior to the proposed start date.

#### NAME AND ADDRESS OF INSTITUTION APPLYING FOR APPROVAL.

**Name of Institution:**

**Web Address:**

**OPEID Code:**

U.S. Department of Education, Office of Postsecondary Education, ID Code -- Title IV eligibility.

**Chief Executives Officer:**

**Mailing Address:**

**Telephone:**

**Email:**

**Institutional Liaison:** Name and title of the individual who will serve as liaison to the Maryland Higher Education Commission:

**Name:**

**Title:**

**Mailing Address:**

**Telephone:**

**Email:**

\*\*\*\*\* CERTIFICATION \*\*\*\*\*

I hereby affirm that the answers given in this application and its attachments are accurate and complete and further agree to comply with the *Annotated Code of Maryland* and State regulations governing the operation of out-of-State degree-granting institutions (COMAR 13B.02.01).

\_\_\_\_\_  
Date  
\_\_\_\_\_  
Signature of Chief Executive Officer

**Electronic applications are preferred for initial and renewal applications. You can send your application to [ooauthorization.mhec@maryland.gov](mailto:ooauthorization.mhec@maryland.gov)**

**All payments should be mailed to:  
Maryland Higher Education Commission  
Director of Academic Affairs  
6 N. Liberty St., 10th Floor  
Baltimore, Maryland 21201**

A copy of these regulations can be found at the Maryland Higher Education Commission’s web site [www.mhec.state.md.us](http://www.mhec.state.md.us) (under Academic Approval Process) along with an on-line application form.

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**I. DURATION OF APPROVAL**

Approval to operate at a previously approved location in Maryland must be renewed annually. However, “during of after the fifth year of operation in Maryland and during any subsequent renewal cycle, an out-of-State institution may apply for approval to operate in Maryland for an extended period of time up to 5 years.” COMAR 13B.02.01.08C(1)

**If the location for which you are applying has been annually approved for at least five years, do you wish to seek approval to operate in the State for an extended period of time of up to 5 years?**

Yes, we wish to be approved for \_\_\_\_\_ years.

**II. SUPPORTING DOCUMENTATION**

Only a complete application can be acted upon. While separate application forms must be completed and submitted for each approved location, the following Supporting Documentation needs to be included only once for each entire package of applications. **CHECK EACH ITEM AS ATTACHED.**

Catalogs and Other Institutional Publications. COMAR 13B.02.01.20A(1)

**Have your catalogs, other institutional publications, or awards changed since they were last submitted?  Yes  No If yes, please submit new copies.**

Application Fee. **(Must accompany all renewals)** COMAR 13B.02.01.08B(2)

The institution shall submit a non-refundable application fee in the amount of (a) \$7,500 for up to two degree programs and (b) an additional \$850 for each degree program over two programs. The institution’s check should be made payable to: Maryland Higher Education Commission. The application renewal fee will be waived for renewals of out-of-state institutions operating at Regional Maryland Higher Education Center.

- Accreditation. (Must accompany all renewals) COMAR 13B.02.01.08B(4)(g)

Provide a copy of the most recent letter of approval (notification) from an organization recognized as an accrediting agency by the U.S. Department of Education. Along with your most recent notification of institutional accreditation, please provide evidence that you are in compliance with that organization's policies and procedures related to off-campus educational activities. If any of your proposed programs require program accreditation provide evidence of that accreditation.

- Registration as an Out-of-State Corporation. (Must accompany all renewals)  
COMAR 13B.02.01.08B(4)(f)

To transact interstate business in Maryland, the institution must qualify with the State Department of Assessments and Taxation by making the certification required in the Corporations and Associations Article, §7-202, Annotated Code of Maryland. A public institution is not required to qualify as a foreign corporation. However, a business entity affiliated with a public institution or a private institution (profit or non-profit) must qualify as a foreign corporation. The Foreign Corporation Qualification Form may be obtained from the Maryland Department of Assessments and Taxation, Room 809, 301 West Preston Street, Baltimore, Maryland 21201 or on-line at: [www.dat.state.md.us](http://www.dat.state.md.us). Once qualified, the institution must provide a copy of the certificate of good standing issued by the State Department of Assessments and Taxation.

- Certificate of Compliance With Fire and Safety Codes (Must accompany all renewals)  
COMAR 13B.02.01.08B(4)(o)

Please provide a certificate for each approved location for indicating that the proposed facility has been inspected and is found in compliance with local and State ordinances pertaining to fire and safety.

- Board of Trustees Resolution of Financial Solvency (Must accompany all renewals)  
COMAR 13B.02.01.08B(4)(e)

Please provide a resolution from your Board of Trustees addressed to the Secretary of Higher Education stating that your institution is financially solvent.

- Advertisements COMAR 13B.02.01.07D(3)(p)

**Are there new advertisements in print format related to your programs in Maryland?**

Yes  No **If yes, please provide copies of the new advertisements.**

- Enrollment Data as Prescribed by the Secretary. (Must accompany all renewals)  
COMAR 13B.02.01.08B(4)(q)

Please provide the information requested on the **Student Enrollment Data Form** found at the end of this application.

- Teach-out Plan (Must accompany all renewals) COMAR 13B.02.01.08B(4)(j)(iv)

The institution must provide a copy of its teach-out plan allowing enrolled students to complete their programs if the institution decides to cease operation in Maryland.

## II. APPLICATION QUESTIONNAIRE

This questionnaire, properly completed with supporting documentation, shall serve as an application for approval to operate in Maryland under the *Code of Maryland Regulations* (COMAR) 13B.02.01. It must be completed for each proposed location.

### 1. Programs.

#### ➤ CURRENTLY OFFERED PROGRAMS.

**INSTRUCTIONS.** Please enter the requested information on your **CURRENTLY OFFERED PROGRAMS** in the spaces provided below, or create an attachment (labeled “A-1: Current Programs”) to this application with the required information.

(a) Provide a list of your currently offered programs at this location. For each program provide the following information: (1) the full title of the program; (2) the degree or certificate to be awarded; (3) the mode of instructional delivery; (4) the number of credit hours (semester or quarter); and (5) whether they are offered at the parent campus.

Program Title	Degree	Mode of Instruction	Total Credit Hours	Offered on Main Campus Yes / No
<i>Example: Organizational Management</i>	<i>M.S.</i>	<i>Classroom</i>	<i>36 sem</i>	<i>Yes</i>
<i>Example: Business Administration</i>	<i>B.S.B</i>	<i>Distance Ed.</i>	<i>120 sem</i>	<i>Yes</i>

#### ➤ NEW PROGRAMS

**INSTRUCTIONS.** Is the institution proposing any new programs at this location?  Yes  No  
**If yes,** please enter the requested information in the spaces provided below, or create an attachment (labeled “A-1: New Programs”) to this information with your responses to the following **for each new program:**

(a) Provide a list of the new programs at this location. For each new program provide the following information: (1) the full title of the program; (2) the degree or certificate to be awarded; (3) the mode of instructional delivery; (4) the number of credit hours (semester or quarter); and (5) whether they are offered at the parent campus.

Program Title	Degree	Mode of Instruction	Total Credit Hours	Offered on Main Campus Yes / No
<i>Example: Organizational Management</i>	<i>M.S.</i>	<i>Classroom</i>	<i>36 sem</i>	<i>Yes</i>
<i>Example: Business Administration</i>	<i>B.S.B</i>	<i>Distance Ed.</i>	<i>120 sem</i>	<i>Yes</i>

(b) If the information does not appear in the catalog or publication you submitted provide (1) a description of the curriculum; (2) the objectives of each course; and (3) a course schedule for the proposed location

(c) Please provide a brief description of the student population to be served by the proposed new programs.

**2. Educational Need.** Before the Commission may evaluate the readiness of an out-of-State institution to operate or award new degrees in the State, including the offering of an instructional program or a degree level not previously approved, the institution shall present evidence demonstrating the educational need to establish operations, offer programs, and award the degrees in question in the State. In addition, the out-of-State institution shall demonstrate that the proposed program, for which the institution is making application, meets a critical and compelling regional or Statewide need and is consistent with the Maryland Postsecondary Education. COMAR 13B.02.01.06A&C

**INSTRUCTIONS: Please enter the requested information in the spaces provided below, or create an attachment (labeled “A-2: Educational Need”) to this application and respond to the following questions for each new program:**

(a) What critical and compelling Regional or Statewide (Maryland) need and demand do your proposed programs meet? In responding to this question provide documentation as indicated below:

(1) If the programs serve occupational needs, present data projecting market demand and the availability of openings in the job market to be served by the new programs for which the institution is making application. This information may include workforce and employment projections prepared by the federal and State governments, the availability of graduates in the State or region, marketing studies done by the institution or others, and material from professional and trade associations.

(2) If the programs serve societal needs (include the traditional liberal arts education), provide a

Description of how the proposed programs will enhance higher education in Maryland and contribute society

(b) If similar programs exist in the State, what are the similarities or differences in your program in terms of the degrees to be awarded, the areas of specialization, and the specific academic content of the programs?

(c) Is a Maryland employer sponsoring/supporting the application for the program(s) to be offered at this location?

Yes  No

**If yes**, please attach a letter of support from the employer addressed to the Assistant Secretary, Planning and Academic Affairs. The letter should outline the employer’s reasons for selecting the institution and its programs and state the benefits to the employees who participate in the program

**3. Administrative Staff.** The out-of-State institution shall provide for an on-site administrative staff responsible for overall administrative operation of educational activities including counseling, advising, testing orientation, financial aid services, and maintenance of academic records. In addition to being responsible for the administration of the policies and procedures of the parent institution, the designated administrators are responsible for meeting the expectations set forth in this chapter [of the Regulatory Standards of the State of Maryland for Out-of-State Institutions]. The duties and size of the staff shall be adequate for the size of the educational activities offered. COMAR 13B.02.01.15

**INSTRUCTIONS:** Has any previously reported Administrative Staff information changed since your last approval at this location?  Yes  No

**If yes**, please enter the requested information in the spaces provided below, or create an attachment labeled (labeled “A-3: Administrative Staff Changes”) to this application with any changes to the following questions:

(a) How are you planning to meet the above standard on Administrative Staff?

(b) Who will be assigned to carry-out each of these duties? Please include a curriculum vitae/resume for each administrator.

#### 4. Faculty

**INSTRUCTIONS:** Has any previously reported Faculty information changed since your last approval at this location?  Yes  No

**If yes, please enter the requested information in the spaces provided below, or create an attachment labeled (labeled “A-4: Faculty Changes”) with any changes to the following questions:**

(a) List all faculty that are to teach in the first year (or cycle) of the programs at this location. For each faculty member provide the following information: COMAR 13B.02.01.08(4)(m)

- (1) the course(s) the faculty might soon teach;
- (2) the degrees the individual holds
- (3) the degrees areas of specialization; and
- (4) whether or not the faculty member is full-time or part-time (adjunct) at your parent institution

(b) Please include a curriculum vitae/resume for each potential faculty member. For those faculty who are yet to be hired include a job description and minimal qualifications.

**5. Library Resources.** Out-of-State Institutions offering programs or courses, or both, in Maryland, shall provide adequate and appropriate library resources within State boundaries and within reasonable distance of the instructional site. Usage statistics shall be kept to determine to what extent these resources are available and accessible. COMAR 13B.02.01.17A

**INSTRUCTIONS:** Has any previously reported library information changed since your last approval at this location?  Yes  No

**If yes, please enter the requested information in the spaces provided below, or create an attachment (labeled “A-5: Library Changes”) to this application with any changes to the following questions.**

(a) How are you planning to meet this standard on Library Resources? Briefly describe the types of materials and titles that you will make available to your students and how they will access them. Will there be provision for bibliographic instruction and/or library orientation?

**6. Student Services.** COMAR 13B.02.01.18 concerns student services and activities. These shall realistically reflect the stated objectives, purposes, and philosophy of the out-of-State institution. Further, an out-of-State institution shall ensure that all students have access to a well developed program of counseling, testing, advisement, orientation, financial aid, career development, and placement. The institution may determine the specific organization of services, as well as the resources and staffing provided, as long as provision for these services are made. Student activities that complement the instructional program are particularly encouraged. COMAR Section .18 also requires that the out-of-State institutions keep complete and accurate records of admission, enrollment, grades, scholarships, transfer of credits, transcripts, graduates, and other essentials in accordance with standard practice. This includes the physical security and confidentiality of such records. The Section requires as well, a published statement of student rights, privileges, and responsibilities and the school’s adherence to its student grievance procedures.

**INSTRUCTIONS:** Has any previously reported Student Services information changed since your last approval at this location?  Yes  No

**If yes, please enter the requested information in the spaces provided below, or create an attachment (labeled "A-6: Student Services") to this application with any changes to the following questions.**

(a) How do you plan to implement the requirements for Student Services cited above?

(b) Regarding student records describe the security measures the institution takes to ensure the confidentiality, physical, and electronic security of your record-keeping system.

(c) Does the institution have a published statement of rights, privileges, and responsibilities of students?  Yes  No How will it make this available to its students at the proposed instructional site? \_\_\_\_\_  
If this statement is in the Catalog you submitted with the application, please indicate the page number: \_\_\_\_  
If not in the Catalog you submitted, please provide us with a copy of the statement.

(d) Does the institution have a published student grievance procedure?  Yes  No If this procedure is in the Catalog you submitted with the application, please indicate the page number \_\_\_\_\_. If not in the Catalog you submitted, please provide us with a copy of the grievance procedure.

**7. Facilities.** (See COMAR 13B.02.01.19).

**INSTRUCTIONS:** Has any previously reported Student Services information changed since your last approval at this location?  Yes  No

**If yes to either question, please enter the requested information in the spaces provided below, or create an attachment (labeled "A-7: Facilities") to this application with any changes to the following questions.**

(a) Has a specific facility been inspected and approved for use as a classroom/laboratory space and been found in compliance with local and State ordinance pertaining to fire and safety?  Yes  No

(1) If yes, please provide a copy of the Certificate of Compliance.

(2) If no, the Certificate of Compliance must be submitted at least 30 days prior to the start of classes.

(b) Describe any special instructional facilities and equipment (computers, audio-visual equipment, etc.) that will be used and available to students in this location.

(c) Describe what provisions are being made for periodic repair and maintenance of buildings and grounds. What measures are being taken for campus security and fire protection? If dangerous or toxic materials are being handled, what provisions are being made for safe storage, handling and disposal?



(d) Describe the office (and conference) space available to full and part-time faculty and administrators.

**8. Distance Education.** “Distance education” means course work for academic credit delivered by telecommunicated instruction to a physical space specifically reserved for the purpose of receiving the instruction, for example, a teleclassroom, and requires the payment of tuition or fees for the instruction. “Distance education” does not include telecommunicated instruction at the student’s initiation via an individual personal computer. COMAR 13B.02.01.03(8). An institution operating in Maryland and delivering instruction in Maryland by distance education shall provide evidence to the Secretary of compliance with the standards of good practice found in COMAR 13B.02.01.21.

**INSTRUCTIONS. Is the institution providing distance education as defined above?  Yes  No**  
**If yes,** please contact the staff at the Maryland Higher Education Commission for a copy of the Standards of Good Practice and provide evidence of compliance as an attachment (labeled “A-8: Distance Education”) to this application

# Student Enrollment Data Form

## Out-of-State Degree Granting Institutions Operating in Maryland

**Institution:** \_\_\_\_\_ **Location:** \_\_\_\_\_  
**Unduplicated Headcount at this location for the past academic year:** September 1, \_\_\_\_\_ to August 31, \_\_\_\_\_  
**Person Completing the Student Enrollment Data Form:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

County/Jurisdiction	Full-Time Undergraduates	Part-Time Undergraduates	Full-Time Graduates	Part-Time Graduates	TOTAL Enrollment
Allegany					
Anne Arundel					
Baltimore County					
Baltimore City					
Calvert					
Caroline					
Carroll					
Cecil					
Charles					
Dorchester					
Frederick					
Garrett					
Harford					
Howard					
Kent					
Montgomery					
Prince George's					
Queen Anne's					
St. Mary's					
Somerset					
Talbot					
Washington					
Wicomico					
Worchester					
Non-Maryland Residents					
<b>TOTALS</b>					

# Student Enrollment Data Form

## Out-of-State Degree Granting Institutions Operating in Maryland

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

Location: \_\_\_\_\_

Please provide for each program at this location, the Total Student Enrollment and Number of Graduates for the past academic year, September 1, \_\_\_\_\_ to August 31, \_\_\_\_\_, Duplicate this form as necessary.

Date Completed: \_\_\_\_\_

Individual Course <u>or</u> Program Major and Award	Full-Time Undergraduates		Part-Time Undergraduates		Full-Time Graduates		Part-Time Graduates		TOTAL Enrollment
	Enroll	Grad	Enroll	Grad	Enroll	Grad	Enroll	Grad	
<b>Undeclared/No Major</b>									
<b>Total</b>									

