

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF HIGHER EDUCATION
OFFICE OF VETERANS EDUCATION
STATE APPROVING AGENCY
454 BROADWAY, SUITE 200, REVERE, MA 02151
(617) 391-6072 FAX (617) 727-0667

NEW BRANCH APPROVAL (SAA) Private NCD

The school must complete and submit an application for <u>each educational program</u> for which the school requests approval for veterans training <u>at this branch location</u>. Title 38, U.S. Code requires that educational institutions and their branches be approved by the State Approving Agency (SAA) prior to certification of enrollment of eligible students to the U.S. Department of Veterans Affairs (VA).

	Name of School Making Application				
	Branch Location (list only one).				
	Name				
	Address				
	Other Identifiers of Branch Location (i.e., room numbe Be specific.	r(s) or name(s), name of building or business, e	etc.).		
_	On-site Contact Person at this Branch Location.	T. L. al. and N. and L. and			
	Name	Telephone Number (including area code)			
	Title				
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Attach a copy of the	curriculum for the program(s)	listed in item #6. Include the n	ame. course number. course
	curriculum for the program(s) th in clock hours of each subjec		ame, course number, course
description and leng		et included in the program.	
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