Application for Schools Accreditation

****

Department of Education

American Accreditation Association

Version 1

|  |  |
| --- | --- |
| General Information | |
| Name of the Institution |  |
| Corporate Name (if applicable) |  |
| Street Address |  |
| City/State/Zip |  |
| Country |  |
| Telephone Number |  |
| Email Address |  |
| Website |  |
| Authorized representative name |  |
| Designation |  |
| Mobile phone |  |
| Email Address |  |
| chief executive officer name |  |
| Mobile phone |  |
| Email Address |  |
|  |  |

|  |  |  |
| --- | --- | --- |
| Eligibility for AAA Accreditation | | |
| Criteria | **Yes** | **No** |
| Use English as a primary language of instruction and communication throughout the school. |  |  |
| Provide a curriculum which reflects best practices in American and International education. |  |  |
| Commit to meeting established standards for school’s accreditation. |  |  |
| Have at least one year of operation. |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Legal Nature of the Institution | | | | | | | | |
| Identify the type of legal entity of the institution by checking all that apply | | | | | | | | |
| Corporation | Wholly owned subsidiary | Partnership | Sole proprietorship | Limited Liability Company (LLC) | Limited Partnership (LP) | General Partnership | Professional/ trade association | If other, please identify |
|  |  |  |  |  |  |  |  | ……… |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Current School Enrollment | | | | | | | | | | | | | |
| Identify all grade levels that are served at your school | | | | | | | | | | | | | | |
| Preschool | | K | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Declaration** | | | |
| **The Institution hereby undertakes:** | | | |
| 1. to comply with Accreditation Standard and the relevant AAA requirements and Terms and Conditions. | | | |
| 1. to pay all fees and costs connected with the accreditation process irrespective of the eventual granting of accreditation. | | | |
|  | | | |
| (iv) to provide access to information, documents and records as necessary for the assessment and maintenance of the accreditation; | | | |
| 1. to provide access to those documents that provide insight into the level of independence and impartiality of the organization from its related bodies, where applicable; and | | | |
| **I declare the information given in this application are correct:** | | | |
| Signed by Authorised Applicant  **Designation:** |  | Organisation Stamp/Seal |  |
| **Date** |  | | |