

# Arkansas Division of Higher Education

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## FORM 1080 EXTENSION COURSE SITE

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This form is not applicable to clinicals, externships, or internships. The fee for this action is \$150.

Do any of the courses to be offered at this location last longer than six months?

If yes, complete Form 1000 Original License Application.

If no, complete this form.

NAME OF SCHOOL	
ADDRESS (LOCATION)	
ADDRESS (MAILING)	
NAME OF CONTACT	
E-MAIL ADDRESS	
PHONE NUMBER	

List the programs or courses that will be taught, proposed state date, and proposed end date.


### Fire Inspection

Submit a copy of a FIRE INSPECTION REPORT that has been completed within the past twelve (12) months for this Extension Course Site.

### STATEMENT OF COMPLIANCE

Under penalty of perjury, I declare and affirm that the statements made on this form, including any attached sheets, are true, complete and accurate.

Printed Name of Official		Title	
Signature of Official		Date	