



# Petition for Change in Control or Legal Status

for consideration by the ATS/COA Board of Commissioners

***Commission-accredited schools must petition for approval prior to undergoing a change in control or legal status. This type of change includes mergers, acquisitions, formal federations, or partnerships where one or more partners change their forms of control or legal status. This type of change also includes a member school acquiring a non-member school, or a member school converting from for-profit to non-profit status or vice versa (per Policies and Procedures IV.C and IV.C.1).***

Given the complexity of these types of changes, schools considering any of these changes should consult with their Commission staff liaison as soon as possible and as often as needed—well before the submission of this petition. Schools must submit the petition for a Change in Control at least 90 days in advance of any proposed change. At the same time, the school must notify all enrolled and prospective students of the impending change (see *Policies and Procedures*, IV.C.1). In completing this petition form, please include links to additional documentation as requested or as deemed helpful. Your Commission staff liaison will contact you if there are any questions regarding this petition.

NOTE: As stated in *Policies and Procedures*, IV.C.1, restructuring a school's governance or revising its bylaws is not considered a substantive change, as long as there is no change of ownership, governing control, or legal status. Changing a school's legal name (including any new "doing business as" designation) is not considered a substantive change but does require notification to, and acknowledgement by, the school's Commission staff liaison (see ATS petitions and notifications webpage).

\* \* \* \*

Please note: you are able to save and return to this form as needed. Click "Save" at the bottom of any page and enter your email address. An email will be sent to you from Jotform (via [noreply@jotform.com](mailto:noreply@jotform.com)) which contains a link to your form in progress.

## i. Name of school:\*

Click to select from menu

NOTE: all references to "school" in the present form refer to the ATS Commission member school submitting this petition

## ii. Contact information for person submitting this form: \*

First Name (MI)

Last Name

## iii. Title:\*

Position title of person submitting this form

**iv. Email: \***

A copy of your form will be sent to this address

**1. Describe briefly the nature of this change in control or legal status: \***

See options listed in opening paragraph above.

**2. Will this change result in the school becoming part of another entity or in the school acquiring another entity that is not an accredited member of ATS? \***

- ☐ No  
☐ Yes\*

**\*If YES, list the name and address of that entity and, if accredited, the name of its accrediting agency:**

**3. Will this change result in a new name for the school? \***

- ☐ No  
☐ Yes\*\*

**\*\*If YES, list the new name for the school:**

Type school name EXACTLY as it should appear in the ATS membership directory

**4. Will this change result in the school relocating to a new address? \***

- ☐ No  
☐ Yes\*\*\*

**4a. \*\*\*If YES, provide the address of the new location:**

Street Address

Street Address Line 2

City

State / Province

**4b. \*\*\*If YES, describe how the school's teach-out plan/agreement meets the criteria listed in Policies and Procedures III.L.1-3:**

All documents must also be uploaded; see final page of this form

**5. Will this change result in the school no longer being an ATS Commission-accredited entity? \***

- ☐ No  
☐ Yes^

**^If YES, list the projected date of withdrawal from the Commission and describe how the school's teach-out plan/agreement meets the criteria listed in Policies and Procedures III.L.1-3:**

All documents must also be uploaded; see final page of this form

**6. Describe the history and rationale for this change: \***

**7. Describe how the missions, contexts, and constituencies of the two schools are similar and different, and how this change will impact the school's ongoing mission and educational effectiveness: \***

See Standard 1.1

**8. Describe what will need to be addressed to align the differences noted above: \***

(e.g., effect on student experience, see Standard 7 opening paragraph, "the specific needs of students pursuing graduate theological education;" effect on faculty and staff, see Standard 8 opening paragraph, "faculty roles...are clear and consistent with school's missions")

**9. Describe how this change will impact the school's financial health and identify the financial resources in place to establish and support the new partnership: \***

(e.g., gain/loss of assets/liabilities, control of endowment, effect on annual surpluses/losses, projected effect on donors, two–three-year budget projections, enrollment projections; costs associated with regulatory applications and visits, expenses related to advisors and due diligence procedures, funds needed while waiting for access to Title IV monies, hiring of any needed additional personnel)  
See Standard 10.3

**10. Describe any changes to the school's governance model: \***

See Standard 9.1

**11. Describe the due diligence that has been conducted and how it aligns with the school's strategic priorities and plan, including how the school has evaluated potential risks and liabilities: \***

(e.g., accreditation history, any litigation, privacy and data security concerns, financial stability, employee benefits, material agreements) See Standard 2

**12. Describe how this change is likely to be perceived by the school's various publics and how it will impact the school's internal AND external constituencies. Describe, also, the strategic communication plan that is guiding how this change will be communicated with the school's constituencies: \***

(e.g., internal constituencies – students, staff, faculty, governing board; external constituencies – denomination, churches, partners, alumni, other supporters) See Standard 1.4

**13. Describe the nature and extent of consultations with the school's ATS Commission staff liaison: \***

14. Describe the steps the school has taken to work through each regulatory management body to which the school is responsible, e.g., U.S. Department of Education, state/provincial agencies, accrediting agencies: \*

Are there any past compliance concerns, public relation issues, or financial responsibility concerns for either school? (see Standards 1.4, 6, and 7) Ensure sufficient time (think years, rather than months) for discernment and obtaining all required approvals.

15. Does the school participate in US Title IV federal financial aid programs?\*

- ☐ No  
☐ Yes^^

^^If YES, describe what steps the school has taken to communicate this change to that federal office and what their response has been:

16. Is the school accredited by another agency?\*

- ☐ No  
☐ Yes^^^

^^^If YES, describe what steps the school has taken to communicate this change to that agency:

17. Describe the anticipate timeline for this change, specifying the exact date the official change is expected to be implemented: \*

When finished, please submit this petition to the ATS Accrediting Records Coordinator by hitting the "submit" button below. You can expect an automated confirmation email within a few minutes. There is no fee for this (or any) Commission petition. Please do not send any paper copies or any emailed attachments; submit only this completed, online form (including any links to additional information requested).

NOTE: Petitions for change in control or legal status are decided by the Board of Commissioners only at their semi-annual meetings usually in February and June (see submission deadlines on ATS petitions and notifications webpage). If approved, this type of substantive change requires a focused evaluation visit within six months of the effective implementation date to determine that the change has not adversely affected the school's ability to meet the Commission's *Standards of Accreditation* (per *Policies and Procedures* IV.C and III.D.1).

ATS Commission Staff Liaison Email \*

Click to select from menu

A copy of your form will be sent to this address

School CEO Email

A copy of your form will be sent to this address

School CAO Email

A copy of your form will be sent to this address

School ALO Email

**Additional comments**

Submit

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