



Institutional Renewal Application for Religious Exemption

I. General Information									
Institution Name:									
Address:									
City:				State:			ZIP + 4		
Phone Number ()				Fax Number ()					
Website:									
Contact Person:									
	First			Last			MI		
Address:									
City:				State:			ZIP + 4		
Phone Number ()				Email address					
President's Name				Title					
Does the school exist outside of Virginia? <input type="checkbox"/> Yes <input type="checkbox"/> No									
If yes, attach document providing information about the school.									
II. Accreditation Information									
<i>If accredited by an organization recognized by the US Dept. of Education, please include a copy of notice of accreditation.</i>									
Accredited <input type="checkbox"/> Yes Name of Accrediting Agency									
Accredited <input type="checkbox"/> No Seeking Accreditation <input type="checkbox"/> Yes <input type="checkbox"/> No									
If seeking accreditation, name of accrediting agency									
Anticipated date of initial accreditation award									
III. Tax Exemption Information									
Does the Institution have 501© (3) tax exemption status? <input type="checkbox"/> Yes <input type="checkbox"/> No									
If yes, provide appropriate IRS verification documentation.									
Federal Tax ID #									

