

Accreditation Application P.O. Box 521, Mount Prospect IL 60056-0521 Tel (800)394-5268 Fax (800)546-3726 escogroup.org

Name of School:			
Address:			
City:	State:	Zip:	
Website:	Tel:	Fax:	
Mailing Address if Different from Above:			
City:	State:	Zip:	
Campus Director:	Title:		
Email:	Tel:	Cell:	
Self-Study Contact:	Title:		
Email:	Tel:	Cell:	
Annual Report Contact:	Title:		
Email:	Tel:	Cell:	
Billing Contact:	Title:		
Email:	Tel:	Cell:	
HVACR Instructor:	□ Full Time □ Adjunct		
Email:	Tel:	Cell:	
HVACR Instructor:	□ Full Time □ Adjunct		
Email:	Tel:	Cell:	
HVACR Instructor:	□ Full Time □ Adjunct		
Email:	Tel:	Cell:	
HVACR Instructor:	□ Full Time □ Adjunct		
Email:	Tel:	Cell:	
HVACR Instructor:	□ Full Time □ Adjunct		
Email:	Tel:	Cell:	
Type of School: Secondary, Post-Secondary, JATC, Correctional			
School is: Public, Not for Profit, For Profit			
Type of Credential Received: Certificate, Diploma, Associates, Bachelors, Correctional, Journeymen			
Under What Legal Authority is the School Operating?			
The School is Currently Licensed or Approved to Operate as a School by the State of:			
The School is Institutionally Accredited by:			
Has the school been: Denied Accreditation or Removed from Accreditation?			
If there are any pending adverse actions against the HVACR program, or instructor? If so, please attach a detailed explanation of the circumstances involved in the action:			
Year Program Established:			
Number of Labs:			
Square Footage of Each Lab:			

Program Enrollment:
Recent Completers:
Completers Placed in HVACR industry:
General Education Hours:
HVACR Course Hours:
The School is Applying for: Initial Accreditation, Re-Accreditation
The Director / Administrator of the school submits this application for which HVAC Excellence programmatic accreditation is sought, and hereby attests to the following: 1. The school is voluntarily seeking accreditation by HVAC Excellence. 2. School officials have reviewed the Standards of Accreditation and supporting materials. 3. School officials fully accept and support the concept of programmatic accreditation as a voluntary, nongovernmental process of third-party validation involving peer review. 4. School officials understand that, in applying for programmatic accreditation, the school. A. voluntarily submits i6. If there are any pending adverse actions against the HVACR program, or instructor? If so, please attach a detailed explanation of the circumstances involved in the action: itself to a periodic review and a reasonable judgment by HVAC as to the program's qualifications. B. has every opportunity, as part of the accrediting process, to present itself in its best light and to respond to any concerns. C. assumes an obligation to be complete, and accurate in presenting information to, and answering questions from members of the HVAC Excellence accrediting board. D. voluntarily accepts responsibility to comply with the Programmatic Accreditation Standards of HVAC Excellence. S. A non-member school will not make any promotional use of its application for programmatic accreditation prior to a grant of accreditation. CERTIFICATION I certify that the information herein and attached hereto is correct and that the school has consistently described itself in identical terms to each accrediting agency (where more than one accrediting body is concerned) with regard to identity, purpose, governance, programs, degrees, diplomas, certificates, personnel, finances, constituents served, and keeps each accrediting agency apprised of any change in its status with one or another accrediting body.
VIDEO The school shall submit a narrated program video using their smartphone, tablet, etc., highlighting the following:
 Laboratory: Walk us through the laboratory, showing all equipment, trainers, and workstations (Inside and Outside).
• Safety: Show all fire extinguishers, eye wash stations, first aid kits, emergency cutoff switches, and your permanently
 installed mechanical exhaust system. Tool Room / Storage: Show test and diagnostic equipment, recording instruments, general hand tools, vacuum
pumps, recovery equipment, brazing equipment, refrigerant storage area.
• Classroom and Office: The video should show the following: training library (audio visual equipment, books, slides, videos, etc.), classroom area, student computers, and the instructor office(s).
Please name the video with your school's name and submit it via Dropbox to https://www.dropbox.com/request/g5Q0xdSrp17V1R2DflBY
Name: Title:
Signature: Date: