

**ASSOCIATION OF AMERICAN COLLEGE
AND UNIVERSITY PROGRAMS IN ITALY**

APPLICATION FOR MEMBERSHIP IN AACUPI

Name and address of institution in the U.S. or Canada requesting membership:

Name of accrediting association in the U.S. or Canada (circle one)

- 1) Middle States Association of Colleges and Secondary Schools;
- 2) New England Association of Schools and Colleges;
- 3) North Central Association of Colleges and Secondary Schools;
- 4) Northwest Association of Secondary and Higher Schools;
- 5) Southern Association of Colleges and Schools Commission on Colleges;
- 6) Western Association of Schools and Colleges;
- 7) Association of Universities and Colleges of Canada.

Name and address of study center in Italy: _____

Date of recognition of study center as a non-profit entity in Italy by the Italian "Ministero dell'Università e della Ricerca Scientifica e Tecnologica": _____

Name of person designated to direct the study center in Italy: _____

ASSOCIATION OF AMERICAN COLLEGE
AND UNIVERSITY PROGRAMS IN ITALY

2/.

Name of person designated as legal representative in Italy: _____

Name of person designated to represent the institution to AACUPI: _____

I hereby state that _____

(name of institution)

is a private / public institution which operates on a non-profit basis in _____

_____ and that all courses offered in Italy by
(country / state)

_____ (name of study center in Italy)

are fully accredited by the home institution.

I agree to notify AACUPI of any changes in persons designated as director, legal representative and/or representative to AACUPI.

Signed: _____

Title: _____

Printed name: _____

Date: _____

(To applicants: Please note that the above statement needs to be signed by the Dean / Vice President in charge of academic affairs at the home institution.)

Please mail and fax to the address below: