



PrintED APPLICATION

Place a check in the appropriate box:

- APPLICATION
 REACCREDITATION APPLICATION

Date of Application _____

School/Institution _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Website URL _____

School Principal: _____ Email _____

School Program Supervisor / Director: _____

Title _____ Email _____

- Type of Program
- High School (Comprehensive-Public)
 - High School (Career Center or Career & Technical Center)
 - High School (Private)
 - Technical College
 - Community College
 - Correctional Facility
 - Other _____

Number of Students in the Program _____

Program Title _____

AREAS OF ACCREDITATION

A program must be accredited in at least **two** instructional areas, one of which must be *Introduction to Graphic Communications*. Place a check in the areas the program will be seeking accreditation.

- Digital File Output and Preparation
- Digital Production Printing
- Graphic Design
- Introduction to Graphic Communications
- Offset Press Operations/Bindery & Finishing
- Screen Printing

INSTRUCTOR INFORMATION

Lead Instructor

Area of Instruction _____

Name _____ Title _____

Phone _____ Email _____

Summer Phone _____ Summer Email _____

Additional Instructor

Area of Instruction _____

Name _____ Title _____

Phone _____ Email _____

Summer Phone _____ Summer Email _____

Additional Instructor

Area of Instruction _____

Name _____ Title _____

Phone _____ Email _____

Summer Phone _____ Summer Email _____

Additional Instructor

Area of Instruction _____

Name _____ Title _____

Phone _____ Email _____

Summer Phone _____ Summer Email _____

SIGNATURES

Director/Principal

Date

Lead Instructor

Date

PrintED accreditation and reaccreditation fees are nonrefundable after ninety days. Prior to the ninety-day deadline, the accreditation or reaccreditation fee is refundable if a written request is submitted to GAERF by the program's supervisor. All returns are subject to a nonrefundable 15% administrative fee. In addition, any PrintED materials sent to the instructor must be returned to GAERF prior to processing the refund request.

PAYMENT INFORMATION

PURCHASE ORDER

If payment of \$1800 is by purchase order, make the purchase order payable to GAERF and send the Application and Purchase Order to:

Graphic Arts Education and Research Foundation
1899 Preston White Drive
Reston, VA 20191-5468

CREDIT CARD

If payment of \$1800 is by credit card, complete the information below and send the Application and Payment Information to:

Graphic Arts Education and Research Foundation
PO Box 79854
Baltimore, MD 21279-0854

Charge: AmEX Carte Blanche Diners Club Discover
 MasterCard Visa

Name on Credit Card

Credit Card Number

Expiration Date

Card Verification Number

Signature of Cardholder (required for charges)

Amount

CHECK

If payment of \$1800 is by check, make the check payable to GAERF and send the Application and Check to:

Graphic Arts Education and Research Foundation
PO Box 79854
Baltimore, MD 21279-0854

School

Address

City

State

Zip Code

4/2016