

STATEMENT OF ASSURANCE OF COMPLIANCE WITH 85 PERCENT ENROLLMENT RATIOS CONTINUATION SHEET

GENERAL INFORMATION

Use this form (VA Form 22-10215a) to provide additional 85/15 calculations as required by Title 38 United States Code (U.S.C.) 3680A(d) and 38 Code of Federal Regulations (CFR) 21.4201.

This form can only be submitted when attached to a completed STATEMENT OF ASSURANCE OF COMPLIANCE WITH 85 PERCENT ENROLLMENT RATIOS, VA FORM 22-10215.

INFORMATION AND INSTRUCTIONS

VA EDUCATION SERVICE HELP AVAILABLE - If you need help calculating your facility's compliance with the 85/15 rule, require assistance submitting routine reports, or have questions concerning the 85/15 rule, contact the **Education Liaison Representative** of jurisdiction.

NOTE: The requirements of this form match those provided on STATEMENT OF ASSURANCE OF COMPLIANCE WITH 85 PERCENT ENROLLMENT RATIOS, VA Form 22-10215. See the instruction sheet for STATEMENT OF ASSURANCE OF COMPLIANCE WITH 85 PERCENT ENROLLMENT RATIOS, VA Form 22-10215 if additional clarification is required while completing this form.

PRIVACY ACT NOTICE: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, Veteran Readiness and Employment Records - VA, published in the Federal Register. An example of a routine use (e.g., VA sends educational forms or letters with a Veteran's identifying information to the Veteran's school or training establishment to (1) assist the Veteran in the completion of claims forms or (2) for VA to obtain further information as may be necessary from the school for VA to properly process the Veteran's education claim or to monitor his or her progress during training). Your obligation to respond is required to obtain or retain education benefits. The responses you provide are considered confidential (38 U.S.C. 5701). Any information provided by applicants, recipients, and others is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 2900-0897, and it expires 1/31/2028. Public reporting burden for this collection of information is estimated to average 1 hour per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing the burden, to VA Reports Clearance Officer at VACOPaperworkReduAct@va.gov. Please refer to OMB Control No. 2900-0897 in any correspondence. Do not send your completed VA Form 22-10215a to this email address.

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OMB Approved No. 2900-0897 Respondent Burden: 1 hour Expiration Date: 1/31/2028

Department of Veterans Affairs										
STATEMENT OF ASSURANCE OF	COMPLIANCE	WITH 8	5 PERC	ENT ENROLLI	IENT RATI	OS CO	NTIN	JATIOI	N SHEET	
1. INSTITUTION NAME			2. FACILITY CODE		3. TERM STAR	T DATE		4. CALCULATION DATE		
5. 85/15 PERCENT CALCULATION										
5A. PROGRAM NAME	OF STUDENTS ENDOLLED		L NUMBER PORTED DENTS DLLED	5D. NUMBER OF SUPPORTED STUDENTS FTE	5E. NUMB OF NON-SUPP STUDENT FTE	ORTED 5F. TOTAL		LLED	5G. SUPPORTED STUDENT PERCENTAGE FTE	
This is page of additional Statement of Assurance	· · · · · · · · · · · · · · · · · · ·			t Ratios Continuation	Sheet(s) provi	ded.				
I HEREBY CERTIFY THAT the calculations listed above a	are true and correct ir	n content a								
6. SCHOOL OFFICIAL PRINTED NAME				7. SCHOOL OFFICIAL TITLE						
8. SIGNATURE OF SCHOOL OFFICIAL				9. DATE SIGNED						