

# Mississippi Commission on College Accreditation

## MS-SARA Cover Sheet

**(Place Cover Sheet in front of Application and Approval Form for Institution Participation in SARA; place documentation behind application form)**

**Institution Name** \_\_\_\_\_

\_\_\_\_\_  
*Name of Primary SARA Contact (Type or Print)*

\_\_\_\_\_  
*Name of Secondary SARA Contact (Type or Print)*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Telephone*

\_\_\_\_\_  
*Telephone*

\_\_\_\_\_  
*Email*

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*Email*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Address*

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| FTE: |  | Fee: |  |
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**FOR AGENCY USE**