

**PrintED REACCREDITATION APPLICATION**  
**PROGRAM INFORMATION**

Date \_\_\_\_\_

Instructor \_\_\_\_\_ Title \_\_\_\_\_

School/Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

The lead instructor has remained the same since the program was initially PrintED accredited.     Yes     No

Instructor(s) has submitted PrintED Instructor Information documents to GAERF.     Yes     No

Program Director/Principal \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

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 REACCREDITATION**

A program may be reaccredited in up to eight instructional areas. A program must be reaccredited in at least two instructional areas, one of which must be *Introduction to Graphic Communications*. It is required that a program be reaccredited in a basic instructional area before being reaccredited in the advanced instructional area. A program may add a new area (s) of accreditation at no extra fee.

- Introduction to Graphic Communications (**Required**)
- Advertising & Design
- Binding & Finishing
- Digital File Output
- Digital File Preparation
- Digital Production Printing
- Offset Press Operations
- Advanced Offset Press Operations
- Advanced Digital File Preparation

**ADVISORY COMMITTEE MEMBERS**

The following individuals serve as members of the Advisory Committee:

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

**SIGNATURES**

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*Director/Principal*

*Date*

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*Instructor*

*Date*

*In order for a school that submits an application and fee for PrintED accreditation or PrintED reaccreditation to receive a refund, a written request must be sent to the Graphic Arts Education and Research Foundation (GAERF®) by the program's supervisor within ninety days of receipt of application. All returns are subject to a non-refundable 15% administrative fee. In addition, any PrintED materials that were 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 return the Application and Purchase Order to:**

Graphic Arts Education and Research Foundation  
1899 Preston White Drive  
Reston, VA 20191-5468  
Fax: (703) 620-3165

**CREDIT CARD PAYMENT**

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

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

**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 PAYMENT**

**If payment of \$1800 is by check, return the Application to:**

Graphic Arts Education and Research Foundation  
1899 Preston White Drive  
Reston, VA 20191-5468  
Fax: (703) 620-3165

**Make the \$1800 check payable to GAERF and return Check and Payment Information to:**

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

\_\_\_\_\_  
*School*

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

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*