

## **State of Washington**

## **Workforce Training and Education Coordinating Board**

128 – 10<sup>th</sup> Avenue SW • P.O. Box 43105 • Olympia, WA 98504 Phone: (360) 709-4600 • Fax: (360) 586-5862

**Private Vocational School License Applicant:** Please complete the <u>shaded</u> section (via typewriting), sign, and return to the Workforce Board by uploading to tab 5, section 3 within the EDvera Initial License Application. Workforce Board staff will send the credit reference out. Examples of references can be banks, utility companies, mortgages, and supply vendors. *Handwritten forms will not be accepted*.

**Financial Reference:** The party identified below is applying for a license to operate a private vocational school and listed your institution as a financial reference. Please complete the information below the shaded box via **fax or mail: Fax: (360) 586-5862, P.O. Box 43105 ● Olympia, WA 98504** 

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Physical Address:		City:	State:	Zip:
Name on Account (if different than School	ol Name or Parent Comp	any):		
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Contact Person:		Phone Number:		
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