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Commonwealth of Massachusetts  
**Division of Professional Licensure**  
**Office of Private Occupational School Education**  
1000 Washington Street • Boston • Massachusetts • 02118

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**ACI CLAIM CHECKLIST**  
**For American Career Institute Students**

Please use this checklist to ensure your claim is complete. Incomplete claims cannot be processed and will be returned to you. This may delay or disqualify your claim, or delay the claim process for all students.

**Each claim must include the following:**

- Claim Form**, with signature in BLUE ink.
- Proof of payment to the school**. Please keep original document(s) for your records.
- Enrollment agreement** with the school, signed by student and a school representative (if available).
- W-9 Taxpayer Identification Number Form**, with signature in BLUE ink.

**After completing the above documents:**

- Please make two sets of copies.
- Mail or hand-deliver the original and one set of copies to the Division of Professional Licensure (DPL) at the address below.
- Keep one set of copies for your records.
- All copies should be single-sided.
- No staples, please.

**If you would like confirmation that DPL has received your claim, please include a self-addressed, stamped envelope. DPL will return a copy of the date-stamped face-page of the application to you as confirmation of receipt.**

If you change your address before this claim is settled, please notify the DPL **immediately** of your new address in writing, including what school you filed a claim against. You must also submit a new [W-9 Taxpayer Identification Form](#).

**Please address all correspondence to:**

MASSACHUSETTS DIVISION OF PROFESSIONAL LICENSURE  
**Office of Private Occupational School Education**  
1000 Washington Street, Suite 710, Boston, MA 02118-6100

**DEADLINE October 4, 2013**



## CLAIM FORM

Please complete all information requested below and attach all required documents so the Massachusetts Division of Professional Licensure (DPL) can determine whether you are eligible for a refund based on your enrollment at the American Career Institute (ACI) and your documentation of payments.

Please note that students who paid ACI by credit card **CANNOT** request a refund for those amounts. Please refer to the credit card process in [Bulletin #1](#).

Complete form in **BLUE** ink. Please print clearly or type all information.

<b>1. Name: Mr. Ms. (please circle)</b>		
<b>2. Street Address &amp; Apt. #</b> If you change address before this claim is settled, please notify the DPL of your new address in writing, including what school you filed a claim against, and you must submit a new <a href="#">W-9 Taxpayer Identification Form</a> .		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>3. Telephone Number – Day:</b> (include area code)		<b>Evening:</b>
<b>4. Email:</b>		
<b>5. Social Security Number; or, if no SSN, Alien Reg. # (last four digits only):</b> xxx-xx-_____		
<b>6. ACI Campus Location:</b>	<b>7. ACI Program:</b>	
<b>8. Check the box which describes your status with the school:</b> <input type="checkbox"/> Student <input type="checkbox"/> Family member of student: _____ <input type="checkbox"/> Other : _____		
<b>9. If you are <u>NOT</u> the student, please enter the name of student and explain the reason why you are filing this claim on behalf of the student: (Note: DPL may require a notarized Power of Attorney.)</b>   <input type="checkbox"/> Notarized Power of Attorney enclosed in the event a student is incapacitated.		
<b>10. Did the student complete the program before the school closed?</b> Yes or No (circle one) <ul style="list-style-type: none"><li>• If the answer is “yes,” then the student is only eligible to file a claim for a refund and for items the student did not receive from ACI (e.g., exam fees, software).</li><li>• If the answer is “no,” please explain why the student did not complete the program if other than the school’s closure. Use an additional sheet, if necessary.</li></ul> <hr/> <hr/> <hr/>		
<b>11. Teach-Out: Did the student participate in a DPL-approved “teach-out” opportunity?</b> Yes or No (circle one) If yes, name of institution: _____		
<b>12. Transfer: Did the student transfer to another institution?</b> Yes or No (circle one) If yes, name of institution: _____		
<b>13. Did the student discharge his/her federal student loans?</b> Yes or No (circle one) If the answer is “no,” please explain why the student did not discharge his/her federal student loans. Use an additional sheet, if necessary.  <hr/> <hr/> <hr/>		

**14. Attach the following documents:**

- Student’s signed enrollment agreement, if available, as evidence of the courses for which the student contracted with the school.
- Student’s ledger card, if available, as evidence of payments made to ACI.
- Student’s transcript, if available, as evidence of courses completed at ACI.
- If student paid ACI with a private student loan, please provide a copy of the loan disclosure statement and/or the retail installment contract. If not available, please contact the payment vendor to obtain a copy.
- If student contracted with a payment vendor (e.g., Tuition Options), please provide a copy of the payment disclosure statement/payment contract. If not available, please contact the payment vendor to obtain a copy.
- If student made payments to a payment vendor (e.g., Tuition Options) that are not on the students’ ledger card, please provide copies of receipts for payments made.
- If student made payments to ACI that are not on the students’ ledger card, provide copies of receipts for payments made to ACI.
  - Provide copies of cancelled checks (both the front and back of the check). If payment was made with a bank issued check, please contact the bank to obtain a copy of the cashed check.
  - Attach copies of cash payment receipts showing the date and amount paid to the school.

**15. Student Claim Calculation**

Indicate the items for which the student paid, but did not receive from the school due to its closure. DPL may be able to reimburse for items for which student paid but did not receive such as books, software, computers, test vouchers, and CPR certificates; however, refunds will first be issued for tuition costs. If any funds remain, they may be used to refund other legitimate expenses related to the school’s closure.

- If a student participated in a teach-out at another school or transferred to another school, the student can **ONLY** file a claim for those items paid for, but not received from, ACI.
- Students who paid ACI by credit card cannot request a refund for those amounts. Please refer to the credit card process in [Bulletin #1](#).

Items	Cost*
Tuition Options: Payments made to Tuition Options for courses not completed at ACI.	
<b>Total</b>	

\*Please be advised that the total claim shown may not be the amount you will be refunded.

I hereby acknowledge that by signing this Claim Form, I am giving the Massachusetts Division of Professional Licensure (DPL) authority to review and secure any and all of my student records in order to appropriately review and resolve this claim. By signing below I certify that:

- I was an active student at ACI at the time of its closure; or, I was on a leave of absence from ACI at the time of its closure; and,
- I did not complete my course or program of study or I did not receive all of the items for which I paid the school due to the school’s closure; and,
- DPL may provide any information about my claim to any court or state or federal agency, if warranted, in order to secure a refund; and,
- DPL may contact my student loan company, if relevant, on my behalf.

**I understand that DPL may disallow ineligible claims, in whole or in part, and that the payment on eligible claims may be reduced due to the limited funds available.**

**I hereby certify that the information provided above is true and accurate to the best of my knowledge.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**

**DEADLINE October 4, 2013**

## Request for Taxpayer Identification Number and Certification

Completed form should be given to the requesting department or the department you are currently doing business with.

**Name** ( List legal name, if joint names, list first & circle the name of the person whose TIN you enter in Part I-See **Specific Instruction** on page 2)

**Business name**, if different from above. (See **Specific Instruction** on page 2)

Check the appropriate box:  Individual/Sole proprietor  Corporation  Partnership  Other

**Legal Address:** number, street, and apt. or suite no.

**Remittance Address:** if different from legal address number, street, and apt. or suite no.

**City, state and ZIP code**

**CITY, STATE AND ZIP CODE**

Phone # ( )

Fax # ( )

Email address:

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). **However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instruction on page 2.** For other entities, it is your employer identification number (EIN). If you do not have a number, see **How to get a TIN** on page 2. **Note: If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.**

Social security number

-

**OR**

Employer identification number

-

**DUNS**

**Vendors:**

**Dunn and Bradstreet Universal Numbering System (DUNS)**

### Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Services (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, **and**
- I am an U.S. person (including an U.S. resident alien).
- I am currently a Commonwealth of Massachusetts's state employee: (check one): No  Yes  If yes, **in compliance with** the State Ethics Commission **requirements.**

**Certification instructions:** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply.

**Sign Here**

**Authorized Signature**

**Date**

#### Purpose of Form

A person who is required to file an information return with the IRS must get your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or debt, or contributions you made to an IRA.

**Use Form W-9 only if you are a U.S. person** (including a resident alien), to give your correct TIN to the person requesting it (the requester) and , when applicable, to:

- Certify the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify you are not subject to backup withholding **If you are a foreign person, use the appropriate Form W-8.** See **Pub 515**, Withholding of Tax on Nonresident Aliens and Foreign Corporations. **What is backup withholding?** Persons making certain payments to you must withhold a designated percentage, currently 28% and pay to the IRS of such payments under certain

conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. **Payments you receive will be subject to backup withholding if:**

- You do not furnish your TIN to the requester, or
- You do not certify your TIN when required (see the Part II instructions on page 2 for details), or
- The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part II instructions on page 2.

#### Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

#### Criminal penalty for falsifying information.

Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

**Name.** If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first and then circle the name of the person or entity whose number you enter in Part I of the form.

**Sole proprietor.** Enter your **individual** name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

**Limited liability company (LLC).** If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, **enter the owner's name on the "Name" line.** Enter the LLC's name on the "Business name" line.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

**Other entities.** Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

### Part I - Taxpayer Identification Number (TIN)

#### Enter your TIN in the appropriate box.

If you are a **resident alien** and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see **How to get a TIN** below.

If you are a **sole proprietor** and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are an **LLC** that is **disregarded as an entity** separate from its owner (see **Limited liability company (LLC)** above), and are owned by an individual, enter your SSN (or "pre-LLC" EIN, if desired). If the owner of a disregarded LLC is a corporation, partnership, etc., enter the owner's EIN.

**Note:** See the chart on this page for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get **Form SS-5**, Application for a Social Security Card, from your local Social Security Administration office. Get **Form W-7**, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN or **Form SS-4**, Application for Employer Identification Number, to apply for an EIN. You can get Forms W-7 and SS-4 from the IRS by calling 1-800-TAX-FORM (1-800-829-3676) or from the IRS's Internet Web Site [www.irs.gov](http://www.irs.gov).

If you do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments.

The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

### Part II - Certification

To establish to the paying agent that your TIN is correct or you are a U.S. person, or resident alien, sign Form W-9.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

#### Dunn and Bradstreet Universal Numbering System (DUNS) number requirement –

The United States Office of Management and Budget (OMB) requires all vendors that receive federal grant funds have their DUNS number recorded with and subsequently reported to the granting agency. If a contractor has multiple DUNS numbers the contractor should provide the primary number listed with the Federal government's Central Contractor Registration (CCR) at [www.ccr.gov](http://www.ccr.gov). Any entity that does not have a DUNS number can apply for one on-line at <http://www.dnb.com/us/> under the DNB D-U-N Number Tab.

#### Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to give your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA or MSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold a designated percentage, currently 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

## What Name and Number to Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
6. Sole proprietorship	The owner <sup>3</sup>
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name, but you may also enter your business or "DBA" name. You may use either your SSN or EIN (if you have one).

<sup>4</sup> List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

**Note:** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**If you have questions on completing this form, please contact the Office of the State Comptroller. (617) 973-2468.**

**Upon completion of this form, please send it to the Commonwealth of Massachusetts Department you are doing business with.**