

**PRIVATE POSTSECONDARY CAREER SCHOOL AGENTS' BOND (BLANKET)**

Surety Bond Number \_\_\_\_\_ Effective Date \_\_\_\_\_

Name of School \_\_\_\_\_

Location of School \_\_\_\_\_

Mail Address of School \_\_\_\_\_, as principal, and

Name of Surety Company \_\_\_\_\_

Address of Surety Company \_\_\_\_\_, as surety,

are held and firmly bound unto the State of Nebraska in the sum of five thousand dollars (\$5,000), per agent, for which payment well and truly to be made, we jointly and severally bind ourselves, and each of our heirs, executors, administrators, and successors firmly by these presents.

THIS OBLIGATION IS THEREFORE CONDITIONED, in accordance with Section 85-1640, Revised Statutes of Nebraska, to provide indemnification to any student suffering loss as a result of any fraud or misrepresentation used in procuring his/her enrollment.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas, the principal above named has applied for permits to enroll students for a private postsecondary career school pursuant to said sections of the Nebraska law.

NOW THEREFORE, if such permits shall be issued, and if all contracts and agreements with students by the agents and the principal above named shall be faithfully performed, and no fraud or misrepresentation is used in procuring the enrollment of any pupil, then this obligation shall be void, otherwise to remain in full force and effect subject to the following provisions:

PROVIDED, HOWEVER, that the aggregate liability of the surety to all such students shall in no event exceed the amount of this bond in the case of any one agent;

THIS BOND may be terminated as to future liability by the surety, subject to the provisions of Section 85-1642, Revised Statutes of Nebraska, upon giving thirty days notice in writing to the principal, and to the Nebraska Department of Education, Division of Adult Program Services, Private Postsecondary Career Schools and Veterans Education Section, Box 94987, Lincoln, Nebraska 68509-4987.

\_\_\_\_\_  
Signature & Title of School Official

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Name of Surety Company

\_\_\_\_\_  
Signature of Agent of Surety Company

\_\_\_\_\_  
Countersigned by Resident Agent

**ATTACH POWER OF ATTORNEY**