



**UNITED STATES DEPARTMENT OF EDUCATION**

**FEDERAL STUDENT AID  
SCHOOL ELIGIBILITY CHANNEL**

**FOREIGN SCHOOL  
PROGRAM PARTICIPATION AGREEMENT  
[PROVISIONAL APPROVAL]**

Effective Date of Approval: The date on which this Agreement is signed on behalf of the Secretary of Education

Approval Expiration Date: **June 30, 2006**

Reapplication Date: **March 31, 2006**

Name of Institution: **Medical University of Lodz**

Address of Institution: **4, Kosciuszko Av.  
Lodz 90-419  
Poland**

OPE ID Number: **03850500**

DUNS Number: **368200841**

**The execution of this Agreement by the Institution and the Secretary is a prerequisite to the Institution's initial or continued participation in any Title IV, HEA Program.**

The postsecondary educational institution listed above, referred to hereafter as the "Institution," and the United States Secretary of Education, referred to hereafter as the "Secretary," agree that the Institution may participate in those student financial assistance programs authorized by Title IV of the Higher Education Act of 1965, as amended (Title IV, HEA Programs) indicated under this Agreement and further agrees that such participation is subject to the terms and conditions set forth in this Agreement. As used in this Agreement, the term "Department" refers to the U.S. Department of Education.

**SCOPE OF COVERAGE**

This Agreement applies to all locations of the Institution as stated on the most current **ELIGIBILITY AND CERTIFICATION APPROVAL REPORT** issued by the Department. This Agreement covers the Institution's eligibility to participate in each of the following listed Title IV, HEA programs, and incorporates by reference the regulations cited.

- **FEDERAL FAMILY EDUCATION LOAN PROGRAM, 20 U.S.C. 1071 et seq; 34 CFR Part 682.**

**PROVISIONAL CERTIFICATION**

This provisional certification is granted for a limited period to permit the Institution to participate in the Title IV, HEA programs referenced in this Agreement. During the period of provisional certification, the participation of the Institution will be subject to revocation for cause. Cause for revocation includes, without limitation, a failure to comply with any provision set forth in this Agreement, a violation of Department regulations deemed material by the Department, or a material misrepresentation in the material submitted to the Department as part of the Institution's application process for this certification. The Department in its sole discretion may provide the Institution with an opportunity to cure any such failure, may

place the Institution on reimbursement funding pending a decision regarding revocation of this Agreement by a designated Department official, or may suspend the participation of the Institution pending a decision by the Department regarding revocation of this Agreement. In the event the Department chooses to revoke this Agreement and the Institution's participation in the Title IV, HEA programs, the Institution will have the right to show cause why this Agreement should not be revoked by presenting its objections to the designated Department official in writing. The Institution agrees that this opportunity to show cause, and not the procedures in 34 CFR 668 subpart G, shall be the sole administrative appeal regarding such revocation. The decision by the designated Department official will constitute the final agency action.

#### **Special Requirements for Substantial Changes Made During Term of Provisional Certification**

Any institution, whether provisionally certified or generally certified, must apply for and receive approval by the Secretary of any substantial change (as hereinafter identified) before it may award, disburse or distribute Title IV, HEA funds based on the substantial change. Substantial changes generally include, but are not limited to: (a) establishment of an additional location; (b) change in ownership, merger or change of type of institution (such as conversion from proprietary to private nonprofit); (c) increase in the level of academic offering beyond those listed in the Institution's Eligibility and Certification Approval Report (ECAR); (d) addition of any nondegree or short-term training program that is not within the immediate scope of programs listed in the ECAR; (e) change in the form of educational measurement; (f) change of State authorizing agency or of primary accrediting agency; or (g) any waiver or recognition of regulatory exception.

If the Institution applies for the Secretary's approval of a substantial change, it must show good cause for making any such substantial change and, in the case of any change described in (a) through (d), the Institution must demonstrate that it has the financial and administrative resources necessary to assure the Institution's continued compliance with the standards of financial responsibility (34 CFR 668.15) and administrative capability (34 CFR 668.16).

### Reasons and Special Conditions of Provisional Certification

#### *Initial Certification*

The Institution is approved for the first time to participate in Title IV, HEA programs, and is granted provisional certification for a period not to exceed one complete award year in which to demonstrate that it satisfies the standards of financial stability and administrative capability.

#### *Application for Recertification*

Upon completion of the period of provisional certification, if the Institution wishes to apply for recertification to participate in the Title IV, HEA programs, the Institution must submit a completed Application for Approval to Participate in Federal Student Financial Aid Programs, together with all required supporting documentation, no later than March 31, 2006.

#### *Grant or Denial of Full Certification*

Notwithstanding any paragraph above, the provisional certification ends upon the Department's notification to the Institution of the Department's decision to grant or deny a six year certification to participate in the Title IV, HEA programs.

## GENERAL TERMS AND CONDITIONS

1. The Institution understands and agrees that it is subject to and will comply with the program statutes and implementing regulations for institutional eligibility as set forth in 34 CFR Part 600 and for each Title IV, HEA program in which it participates, as well as the general provisions set forth in Part F and Part G of Title IV of the HEA, and the Student Assistance General Provisions regulations set forth in 34 CFR Part 668.  
*The recitation of any portion of the statute or regulations in this Agreement does not limit the Institution's obligation to comply with other applicable statutes and regulations.*
2. The Institution acknowledges and agrees that 34 CFR Part 602 requires legal authorization and approval of the Institution by the country's authorized agency, commission, or statutory body and those agencies and the Secretary may share or report information to one another about the Institution without limitation.
3. The Institution certifies that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from coverage transactions by its country's government or by any approving agency as defined at 34 CFR Part 85, §§85.105 and 85.110.

### SELECTED PROVISIONS FROM GENERAL PROVISIONS REGULATIONS, 34 CFR PART 668

By entering into this Program Participation Agreement, the Institution agrees that:

(1) It will comply with all statutory provisions of or applicable to Title IV of the HEA, all applicable regulatory provisions prescribed under that statutory authority, and all applicable special arrangements, agreements, and limitations entered into under the authority of statutes applicable to Title IV of the HEA, including the requirement that the institution will use funds it receives under any Title IV, HEA program and any interest or other earnings thereon, solely for the purposes specified in and in accordance with that program;

(2) It will not request from or charge any student a fee for processing or handling any application, form, or data required to determine a student's eligibility for, and amount of, Title IV, HEA program assistance;

(3) It will establish and maintain such administrative and fiscal procedures and records as may be necessary to ensure proper and efficient administration of funds received from the Secretary or from students under the Title IV, HEA programs, together with assurances that the institution will provide, upon request and in a timely manner, information relating to the administrative capability and financial responsibility of the institution to--

(i) The Secretary;

(ii) The Country's regulatory bodies or any other agency for the country or countries in which the institution or any of the institution's campuses or other locations are located;

(iii) A guaranty agency, as defined in 34 CFR part 682, that guarantees loans made under the Federal Stafford Loan, and Federal PLUS programs for attendance at the institution or any of the institution's campuses or other locations;

- (4) It will comply with the provisions of §668.15 relating to factors of financial responsibility;
- (5) It will comply with the provisions of §668.16 relating to standards of administrative capability;
- (6) It will submit reports to the Secretary and, in the case of an institution participating in the Federal Family Education Loan (Federal Stafford Loan and Federal PLUS) Programs to the holders of loans made to the students with U.S. citizenship or eligible noncitizen status studying in that institution under these programs at such times and containing such information as the Secretary may reasonably require to carry out the purpose of the Title IV, HEA programs;
- (7) It will not provide any statement or certification to any lender under the Federal Stafford Loan or Federal PLUS Program that qualifies the student for a loan or loans in excess of the amount that the student is eligible to borrow in accordance with §§425(a), 428(a)(2), 428(b)(1)(A) and (B), and 428H of the HEA;
- (8) It will comply with the requirements of Subpart D of 34 CFR part §§668.43 and 44 concerning institutional and financial assistance information for students and prospective students;
- (9) In the case of an institution that advertises job placement rates as a means of attracting students to enroll in the institution, it will make available to prospective students, at or before the time that those students apply for enrollment, the most recent available data concerning employment statistics, graduation statistics, and any other information necessary to substantiate the truthfulness of the advertisements;
- (10) In the case of an institution seeking to participate for the first time in the Federal Stafford Loan and Federal PLUS Program, the institution has included a default management plan as part of its application under §600.20 for participation in those programs and will use the plan for at least two years from the date of that application;
- (11) In the case of an institution that changes ownership that results in a change of control, or that changes its status as a main campus, or an additional location, the institution will, to participate in the Federal Stafford Loan and Federal PLUS Programs, develop a default management plan for approval by the Secretary and implement the plan for at least two years after the change in control or status.
- (12) The Secretary, guaranty agencies and lenders as defined in 34 CFR Part 682, country's authorized government agencies that legally authorize institutions and branch campuses or other locations to provide the postsecondary education, have the authority to share with each other any information pertaining to the institution's eligibility for or participation in the Title IV, HEA programs or any information on fraud and abuse;
- (13) It will not impose any penalty, including, but not limited to, the assessment of late fees, the denial of access to classes, libraries, or other institutional facilities, or the requirement that the student borrow additional funds for which interest or other charges are assessed, on any student because of the student's inability to meet his or her financial obligations to the institution as a result of the delayed disbursement of the proceeds of a Title IV, HEA program loan due to compliance with statutory and regulatory requirements of or applicable to the Title IV, HEA programs, or delays attributable to the institution;
- (14) It will not provide, nor contract with any entity that provides, any commission, bonus, or other incentive payment based directly or indirectly on success in securing enrollments or financial aid to any persons or entities engaged in any student recruiting or admission activities or in making decisions regarding the awarding of student financial assistance, except that this requirement shall not apply to the recruitment of foreign students residing in foreign countries who are not eligible to receive Federal Student Assistance. This provision does not apply to the giving of token gifts to students or alumni for referring students for admission to the institution as long as: the gift is not in the form of money, check, or money order; no more than one such gift is given to any student or alumnus; and the gift has a value of not more than \$100;
- (15) It will meet the requirements established pursuant to Part H of Title IV of the HEA by the Secretary, country's legally recognized authorized agencies;
- (16) It will comply with the refund provisions established in 34 CFR Part 668.22;
- (17) It is liable for all improperly administered funds received or refunded under the Title IV, HEA programs, including any funds administered by a third-party servicer;
- (18) The Institution is required to compile and make available information about security policies and crime statistics in accordance with 34 CFR §668.47 and §485(f) of the HEA;
- (19) (i) This Agreement becomes effective on the date that the Secretary signs the Agreement;  
(ii) This Agreement supersedes any prior Agreement between the Secretary and the Institution;
- 20)a. With respect to an institution that has been certified *other than under a provisional certification*--  
(1) Except as provided in paragraphs (ii) and (iii) of this section, the Secretary terminates this Agreement through the proceedings in Subpart G of 34 CFR §668.  
(2) An institution may terminate this Agreement.  
(3) If the Secretary or the Institution terminates this Agreement under paragraph (i) of this section, the Secretary publishes the termination date.  
b. With respect to an institution that has been *provisionally certified*, the Secretary revokes a provisional certification through the proceedings in §668.13(d).  
(i) An Institution's program participation agreement automatically expires on the date that--  
(1) The Institution changes ownership that results in a change in control as determined by the Secretary under 34 CFR 600, or

(2) The Institution's participation ends under the provisions of 34 CFR §668.26(a)(1), and (2).

(a) An Institution's program participation Agreement no longer applies to or covers a location of the Institution as of the date on which that location ceases to be a part of the participating Institution.

IN WITNESS WHEREOF

the parties hereto have caused this Agreement to be executed by their duly authorized representatives.

Signature of Institution's Chief Executive Officer: REKTOR  
*Andrzej Lewiński*  
Prof. dr hab. Andrzej Lewiński Date: 2005/01/06

Print Name and Title: REKTOR, MEDICAL UNIVERSITY  
OF LÓDŹ

For the Secretary: *M. Dennis Conrad* Date: Jan 31, 2005  
U.S. Department of Education



UNITED STATES DEPARTMENT OF EDUCATION  
FEDERAL STUDENT AID  
CASE MANAGEMENT & OVERSIGHT  
CASE MANAGEMENT DIVISION – NORTHEAST  
FOREIGN SCHOOLS TEAM  
WASHINGTON, DC 20202-5340

**FAX**

**FEDERAL STUDENT AID / FOREIGN SCHOOLS TEAM**

Date: ~~March 30, 2004~~ April, 1, 2004

To: Dr. Jay Kadiyala

From: Jorge Matos

Phone: (212) 967-2411

Fax: (202) 275-3486

Fax: (212) 629-0054

Phone: (202) 377-3168

**Urgent**

**X For Review**

**Please Comment**

**Please Reply**

**Please Recycle**

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**•Comments:**

Good morning Dr. Kadiyala,

Like we discuss few minute ago, this is the letter please read and call or e-mail with any question or problems

E-mail: [Jorge.Matos@ed.gov](mailto:Jorge.Matos@ed.gov)



UNITED STATES DEPARTMENT OF EDUCATION  
FEDERAL STUDENT AID  
CASE MANAGEMENT & OVERSIGHT  
CASE MANAGEMENT DIVISION – NORTHEAST  
FOREIGN SCHOOLS TEAM  
WASHINGTON, DC 20202-5340

**FAX**

**FEDERAL STUDENT AID / FOREIGN SCHOOLS TEAM**

*Date August 26, 2004*

**To:** Mr. Thomas Whiting

**From:** Jorge Matos

**Phone:** (212) 637-0519

**Fax:** (202) 275-3486

**Fax:** (212) 264-5025

**Phone:** (202) 377-3168

**Urgent**

**X For Review**

**Please Comment**

**Please Reply**

**Please Recycle**

---

**•Comments:**

Good afternoon Mr. Whiting,

Sorry to bother you with this, Mr. Vettickal is working with this school and we send the first financial to you, again my apologize for the inconvenience. Just let me know if you can work it out. Thank again Mr. Whiting

E-mail: [Jorge.Matos@ed.gov](mailto:Jorge.Matos@ed.gov)

\*\*\*\*\*  
 \*\*\* TX REPORT \*\*\*  
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TRANSMISSION OK

TX/RX NO 1152  
 CONNECTION TEL 912122645025  
 SUBADDRESS  
 CONNECTION ID SFAP REG 2. NY  
 ST. TIME 08/26 15:14  
 USAGE T 02'07  
 PGS. 7  
 RESULT OK



**UNITED STATES DEPARTMENT OF EDUCATION  
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\*\*\* TX REPORT \*\*\*  
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TRANSMISSION OK

TX/RX NO 0011  
CONNECTION TEL 912126290054  
SUBADDRESS  
CONNECTION ID  
ST. TIME 03/30 12:58  
USAGE T 02'18  
PGS. 6  
RESULT OK



**UNITED STATES DEPARTMENT OF EDUCATION  
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CASE MANAGEMENT & OVERSIGHT  
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**Urgent X For Review Please Comment Please Reply Please Recycle**

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E-mail: Jorge.Matos@ed.gov

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\*\*\* TX REPORT \*\*\*  
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TRANSMISSION OK

TX/RX NO 0027  
CONNECTION TEL 912126290054  
SUBADDRESS  
CONNECTION ID  
ST. TIME 04/01 08:59  
USAGE T 02'19  
PGS. 6  
RESULT OK



**UNITED STATES DEPARTMENT OF EDUCATION  
FEDERAL STUDENT AID  
CASE MANAGEMENT & OVERSIGHT  
CASE MANAGEMENT DIVISION - NORTHEAST  
FOREIGN SCHOOLS TEAM  
WASHINGTON, DC 20202-5340**

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Date: ~~March 30, 2004~~ April 1, 2004

To: Dr. Jay Kadiyala From: Jorge Matos

Phone: (212) 967-2411 Fax: (202) 275-3486

Fax: (212) 629-0054 Phone: (202) 377-3168

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E-mail: Jorge.Matos@ed.gov



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FEDERAL STUDENT AID  
CASE MANAGEMENT & OVERSIGHT  
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FOREIGN SCHOOLS TEAM  
WASHINGTON, DC 20202-5340

**FAX**

**FEDERAL STUDENT AID / FOREIGN SCHOOLS TEAM**

*Date July 15, 2004*

**To:** Mr. Tom Whiting

**From:** Jorge Matos

**Phone:** (212) 637-0519

**Fax:** (202) 275-3486

**Fax:** (212) 264-5025

**Phone:** (202) 377-3168

**Urgent**

**X For Review**

**Please Comment**

**Please Reply**

**Please Recycle**

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**\*Comments:**

Good morning Mr. Whiting

This was fax this morning.

E-mail: [Jorge.Matos@ed.gov](mailto:Jorge.Matos@ed.gov)

\*\*\*\*\*  
\*\*\* TX REPORT \*\*\*  
\*\*\*\*\*

TRANSMISSION OK

TX/RX NO 0751  
CONNECTION TEL 912122645025  
SUBADDRESS  
CONNECTION ID SPAP REG 2. NY  
ST. TIME 07/15 07:21  
USAGE T 02'55  
PGS. 12  
RESULT OK



**UNITED STATES DEPARTMENT OF EDUCATION  
FEDERAL STUDENT AID  
CASE MANAGEMENT & OVERSIGHT  
CASE MANAGEMENT DIVISION - NORTHEAST  
FOREIGN SCHOOLS TEAM  
WASHINGTON, DC 20202-5340**

**FAX**

**FEDERAL STUDENT AID / FOREIGN SCHOOLS TEAM**

Date July 15, 2004

To: Mr. Tom Whiting

From: Jorge Matos

Phone: (212) 637-0519

Fax: (202) 275-3486

Fax: (212) 264-5025

Phone: (202) 377-3168

**Urgent**

**X For Review**

**Please Comment**

**Please Reply**

**Please Recycle**

**Comments:**

Good morning Mr. Whiting

This was fax this morning.

*Hello Dr. V.  
Report from  
Dun & Bradstreet  
will fax to Mr. W.*

*Fax on 7/19/2004  
at 8:17am*

## Robertson, Stephanie

---

**From:** Robertson, Stephanie  
**Sent:** Tuesday, February 01, 2005 10:40 AM  
**To:** 'rektor@rkt.am.lodz.pl'  
**Cc:** 'medschoolinfo@aol.com'  
**Subject:** Approval Letter for 03850500 Medical University of Lodz

Dear Prof. Dr Lewinski:

The Foreign Schools Case Management Team is pleased to inform you that, based upon the information included in your Application for Approval to Participate in Federal Student Financial Aid Programs, the Secretary of Education (Secretary) has determined that Medical University of Lodz satisfies the definition of an eligible institution under the Higher Education Act of 1965, as amended (HEA).

Please go out to the PPA/ECAR page, <http://eligcert.ed.gov/eapp/owa/ppaecar>, on the EAPP web site and print and review a copy of the Eligibility and Certification Approval Report (ECAR) and the Approval Letter. Together, the Program Participation Agreement (PPA) that has been signed on behalf of the Secretary and mailed separately to the Institution and the ECAR constitute the Foreign Schools Case Management Team's determination that the Institution has qualified to participate in programs under the Higher Education Act of 1965, as amended (HEA) and the Federal student financial assistance programs (Title IV, HEA programs).

The Institution must retain the ECAR and the PPA together.

Should you have any questions, please contact the Foreign Schools Case Management Team at (202) 377-3168.

## Vettickal, Joseph

**From:** Whiting, Thomas  
**Sent:** Wednesday, July 21, 2004 11:18 AM  
**To:** Vettickal, Joseph  
**Subject:** Lodz Univ

Joe

Looked at financials for Lodz and there are a couple of issues (aren't there always):

1. For some reason the audit for the FYE 12/31/02 was broken into 2 parts, a 9 month audit from 1/1/02 to 9/30/02 and a 3 month audit from 10/1/02 to 12/31/02. We do not accept partial period audits. The financials have to be for the entire 12 month period. Rather than redoing the 12/31/02 audit as a 12 month audit, the 12/31/03 financials should be submitted since we will need them before we can certify the school anyway.

2. The auditor refers to supplementary info and explanations in his opinion letter but there doesn't appear to be any such information included in the financials. If there are supplementary info and explanations, we would also need this info to be submitted with the 12/31/03 financials.

Once we get a complete set of the 12/31/03 financials we should be fine.

Tom

*On August 26, (2004) Tom received a complete set of financials in an acceptable condition. He did not send the BDES form. He was also present at the Team Concall.*

OPE ID	Name	Address	Line 2	City
038505 00	Medical University of Lodz	4, Kosciuszko Av.		Lod

Fiscal Year End **12/31/2003**      Locator OPE ID **038505 00**

Date Received **10/04/2004**      Audited  Yes  No

The audit opinion is **U**  Unqualified

- Participants
- Resubmission
- School Group
- Indefat
- CIO

Case Team  
**11**

Change in Auditor  Yes  No

Previous Auditor **Wladyslaw Falowski**

Auditor's Name **Wladyslaw Falowski**

Override Submitted      Name

Overridden  Yes  No      Dt

Last Update Date/User **10/04/2004 10:56 Charles Ogala**

Ez-audit Transfer

OPR_ID	Name	Address	Line 2	City	St	Zip
038505 00	Medical University of Lodz	4, Kosciuszko Av.		Lodz		?

Current Status **NA**

Fiscal Year End	FY					Due Date	Received Date	Reminder Letter Sent Date	Delinquent Letter Sent Date	Release Date	Out come	Flagged	Score	Can
	Sch End	Brp	Chg	Indt	CI0 E2									
12/31/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	09/30/2004	10/04/2004			10/04/2004	Incom	<input type="checkbox"/>		
12/31/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	09/30/2003	10/04/2004			10/04/2004	Incom	<input type="checkbox"/>		
12/31/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	09/30/2002	10/04/2004			10/04/2004	Incom	<input type="checkbox"/>		
12/31/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	09/30/2001	10/04/2004					<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>		

Update Primary Review GI Worksheet Participants Values Detail Report

## **Vettickal, Joseph**

---

**From:** Hunt, Stephen (OUS)  
**Sent:** Wednesday, July 07, 2004 11:16 AM  
**To:** Vettickal, Joseph; Coombs, Geneva; Buntebart, Janet; Swift, William; Gust, Mary; Gilbert, Mark; Howard, Pat; Andre, Roseanne; Bacon, Hearl; Matos, Jorge; Fediw, Marcia; Moore, Richard; Touliatos, Olga; Quintero, Hector; Shahid, Asad; Robertson, Stephanie; Whiting, Thomas; Hough, Valerie  
**Subject:** RE: Foreign School Initial Applicants

Joe, et. al.,

The Medical University (Academy) of Lodz is a fully recognized and accredited state higher education institution in Poland. It is authorized to award degrees in medicine and related sciences and professions through the research doctorate (this includes the first-professional level). Poland's medical education system is one of those deemed to have accrediting standards equivalent to ours by the NCFMEA (as of 09/2003).

The Alliance Institute of Medicine, with which Lodz is affiliated in the USA, is an entity created by Poles in the U.S. and overseas to facilitate the training of physicians in both countries. It handles matters such as admissions, visa applications, location of preclinical and clinical education, internship and residency placements, etc. Students travel back and forth, but the education is performed at the Polish universities. However, to my knowledge AIM is not accredited in the USA or Poland as a medical school in its own right. A student enrolling in Lodz is enrolling in an accredited medical school recognized in the USA; a student claiming to be enrolled simply in AIM probably is not.

The Universidad Catolica Tecnologica del Cibao (UCATECI) is one of three state-accredited Catholic universities recognized by the Secretaria del Estado de Educacion superior, ciencia, y tecnologia (SEESCYT). Because the information on UCATECI is frequently confused with UTECI (a public university) online, I had the DR Embassy call SEESCYT and confirm the accreditation of UCATECI and that it is a distinct institution separate from UTECI. SEESCYT also confirmed the address and the name of the rector as the institution had reported it to you.

Thanks,

E. Stephen Hunt, Ph.D.  
Senior International Affairs Specialist  
Manager, USNEI  
U.S. Department of Education  
400 Maryland Avenue, NW, Rm. 6W242  
Washington, DC 20202  
Tel. 1-202-401-3710  
Fax 1-202-401-2508  
Web: <http://www.ed.gov/about/offices/list/ous/international/usnei/>

-----Original Message-----

**From:** Vettickal, Joseph  
**Sent:** Thursday, July 01, 2004 12:36 PM  
**To:** Coombs, Geneva; Buntebart, Janet; Swift, William; Hunt, Stephen (OUS); Gust, Mary; Gilbert, Mark; Howard, Pat; Andre, Roseanne; Bacon, Hearl; Matos, Jorge; Fediw, Marcia; Moore, Richard; Touliatos, Olga; Quintero, Hector; Shahid, Asad; Robertson, Stephanie; Whiting, Thomas; Hough, Valerie  
**Subject:** Foreign School Initial Applicants

Listed below are applicants for initial participation in the Federal Student Aid Programs. These institutions have submitted applications which have been received by the Foreign Schools Case Management Team.

Please note that the Foreign Schools Team has not yet completed its review of the applications and therefore, has not made any determinations on the appropriateness or the accuracy of the information provided on the applications.

If you have information or issues that the case team should use in making its final decisions about the schools listed, please notify me immediately. Thank you for your attention to this matter.

Joseph Vettickal  
Management and Program Analyst  
U.S. Department of Education

QPE ID	Name	Address	Line 2	City
038505 00	Medical University of Lodz	4, Kosciuszko Av.		Lod

Are the following properly presented?

Balance Sheet	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> N/A	<input checked="" type="checkbox"/>
Income Statement	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> N/A	<input checked="" type="checkbox"/>
Change in Equity	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> N/A	<input checked="" type="checkbox"/>
Cash Flows	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> N/A	<input checked="" type="checkbox"/>
Consol. Statements	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> N/A	<input checked="" type="checkbox"/>
Notes	<input type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="checkbox"/>
Rev. Attestation	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> N/A	<input checked="" type="checkbox"/>
Not Accepted For	<input type="checkbox"/> ?			
Economic Entity	<input type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="checkbox"/>
In English	<input type="radio"/> Yes	<input type="radio"/> No		

Comments for Letter

Internal

Disclosures in Notes

Going Concern	<input type="radio"/> Yes	<input type="radio"/> No
Contingent Liabilities	<input type="radio"/> Yes	<input type="radio"/> No
Debt Agreement Violation	<input type="radio"/> Yes	<input type="radio"/> No
ED Compliance Issues	<input type="radio"/> Yes	<input type="radio"/> No
Deferred Income/Income Recognition Problem	<input type="radio"/> Yes	<input type="radio"/> No
Late Refund	<input type="radio"/> Yes	<input type="radio"/> No
Other Issues	<input type="radio"/> Yes	<input type="radio"/> No

Release Date: 10/04/2004    QB Name: Charles Agala     Override Flagged

Date Screened: 10/04/2004    Outcome: Incomplete     Flagged Later

Incomplete Letter    Accounting Issue

Foreign Schools Team  
Phone: (202) 377-3164  
Fax: (202) 275-3486  
Email address: Joseph.Vettickal@ed.gov

1) OPEID: 03850500

School Name/Address:

Medical University of Lodz  
4, Kosciuszko Av  
Lodz, Poland 90-419  
DUNS: 368200841

Additional Locations: None listed

U.S. Administrative Offices: Alliance Institute of Medicine

350 Fifth Avenue, Suite 1523  
New York, NY 10118

Contact Person: Chaitanya (Jay) Kadiyala, M.D., J.D

Country Authorization/Medical School Accrediting Agency:

Ministry of Health and Social Welfare (ACPUNS), Warsaw, Poland

Medical: Yes

Owner: Foreign Public

Officials: Prof. Dr. Andrezej Lewinski M.D. Rector

Dr. Jan Wilczynski MR., CFO

Dr. Chaitanya (Jay) Kadiyala MR., FAA

2) OPEID: 03801300

School Name/Address:

Universidad Catolica Tecnologica del Cibao  
Ave. Universitaria, entrada Ave.  
La Vega, Dominican Republic  
DUNS: 871475513

Additional Locations: Not listed

U.S. Administrative Offices: None

Country Authorization/Medical School Accrediting Agency:

Secretaria de Estado de Educacion Superior Ciencia Tecnologia

Medical School: Yes

Owner: Foreign Private Non-profit

Officials and Directors: Monsignor Fausto R. Mejia, Rector

Sr Juan H. Veras, CFO

Sr Rodolfo Garcia, FAA

Mrs. Hild Pichardo, Contact Person

Name and address (1)	Year instruction started (2)	Conditions of admission (3)	Curriculum (4)	No. of hospital beds (5)	Academic year 1983-1984			
					No. of first year admissions (6)	Total enrollment (7)	No. of graduates (8)	No. of teaching staff (9)
Akademia Medyczna, ul. Cicha 4, 20-950 LUBLIN	1949	(a) No (b) Yes (c) Yes (d) Yes (e) Yes (f) No	(a) No (b) Yes (c) Yes (d) Yes (e) Yes (f) Yes	1983	N m 205 f 485 F m 13	N m 1234 f 2432 F m 38 f 6	N m 180 f 428 F m 4	n 725 pt 15
Akademia Medyczna <sup>a</sup> , ul. Fredry 10, 61-701 POZNAŃ	1919	(a) No (b) Yes (c) Yes (d) Yes (e) Yes (f) No	(a) Yes (b) Yes (c) Yes (d) Yes (e) 1950 (f) No	2749	N m 234 f 441 F m 20 f 4	N m 267 f 1875 F m 66 f 14	N m 174 f 350 F m 9 f 2	n 348
Pomorska Akademia Me- dyczna, im. Gen. K. Świerczewskiego, ul. Rybacka 1, 70-204 SZCZECIN	1948	(a) Yes (b) Yes (c) Yes (d) Yes (e) Yes (f) No	(a) No (b) Yes (c) Yes (d) Yes (e) No (f) Yes	1635	N m 133 f 226 F m 26	N m 667 f 1031 F m 46	N m 110 f 182 F —	n 588 pt 22
Akademia Medyczna w. Warszawie, ul. Filtrowa 30, 02-032 WARSZAWA	1813	(a) Yes (b) Yes (c) Yes (d) Yes (e) Yes (f) No	(a) Yes (b) Yes (c) Yes (d) Yes (e) 1965 (f) Yes	4000	N m 252 f 411 F m 15 f 14	N 3996 F m 47 f 47	N m 229 f 436 F m 14 f 3	n 1220 pt 26
Akademia Medyczna we Wrocławiu, ul. Pasteura 1, 50-637 WROCLAW	1945	(a) Yes (b) Yes (c) Yes (d) Yes (e) Yes (f) No	(a) Yes (b) Yes (c) Yes (d) Yes (e) 1945 (f) Yes	1988	N m 165 f 170 F m 19 f 6	N m 1037 f 1237 F m 85 f 22	N m 141 f 217 F m 20 f 2	n 545 pt 24

<sup>a</sup> 1982-1983 figures.

## Portugal

Total population in 1984	10 164 000
Number of physicians in 1983	23 358*
Number of medical schools	5

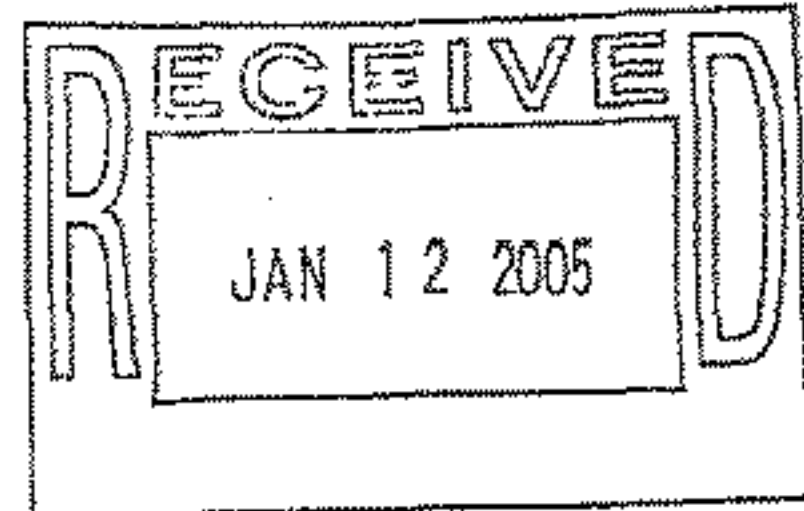
\* Includes physicians practising dentistry.

United States Department of Education  
Federal Student Aid, Schools Channel  
Attention: Foreign Schools Case Team  
Union Center Plaza, 73C3  
830 First Street, NE  
Washington, DC 20202-5340

January 10, 2005

Please find, enclosed, two signed foreign school program participation agreements, as requested in your recent email and telephone calls to us. We thank you all for your help in the past from the beginning of this process, more than a year ago. If you need any additional information or documents, please let us know. You may contact our New York offices at the following address:

Dr Jay Kadiyala, M.D, J.D.  
350 Fifth Ave, Suite 1523  
New york, NY 10118  
Tel: 212 967 2411



OPER ID	Name	Address	Line 2	City	St	Zip
038505 00	Medical University of Lodz	4, Kosciuszko Av.		Lodz		?

Navigation: < | >

<b>School</b>	Medical University of Lodz		<b>Other Address</b>
<b>Trade Name</b>			<b>Ed Site</b>
<b>Legal Address</b>			<b>Admin Site</b>
<b>Street</b>	4, Kosciuszko Av.		<b>Experimental</b>
<b>City</b>	Lodz	<b>State</b>	<b>Detail Report</b>
<b>Zip</b>			
<b>TIN</b>		<b>School Type</b> 5 ? Foreign Public	<b>Region</b> 11 Foreign School Team/GLOS
<b>DUNS</b>		<b>Ethnicity</b> 5 ? Ethnicity Not	<b>Case Team</b> 11 Team 11 - Foreign Schools
<b>1st Instr</b> 05/24/1945	<b>Structure Chng Dt</b>		<b>County</b> ?
<b>Web Page</b>			<b>Congress</b>
<b>EAPP</b>	<input checked="" type="checkbox"/> Application In-process		<b>Program Length</b> ?
<b>Start</b> 02/25/2004	<b>Submit</b> 04/21/2004	<b>Official on App</b>	<b>Acad Calendar</b> ?
<b>Purpose</b> Initial Certification			<b>FAADS</b> ?
<b>Status</b> Assigned			<b>SIC</b> ?
			<b>QA Begin</b> End

**Dun & Bradstreet**

# Business Information Report™

Page 1 of 11

For: JOSEPH VETTICKAL  
EDUCATION - OPEXOJuly 15, 2004  
6:56 am**IDENTIFICATION**

D-U-N-S : 36-820-0841

Registered Name : UNIWERSYTET MEDYCZNY W LODZI

Operating Address : Ul. Kosciuszki 4, 90-419 Lodz  
prov. lodzkie, PolandRegistered Address: Ul. Kosciuszki 4, 90-419 Lodz  
prov. lodzkie, PolandTel. : {48-42} 639-33-08, {48-42} 639-33-08,  
{48-42} 639-39-11, {48-42} 639-39-11

Fax : {48-42} 639-33-09, {48-42} 639-33-09

Mobile : (b)(6)

e-mail : bangl@achilles.wam.pl

www : www.umed.lodz.pl

**EVALUATION BY DnB**DB Rating : 4A4  
Condition : PDOR  
Maximum credit : Not advised

(b)(4)

Evaluation has been prepared upon financial statement closed on: 31-12-2002

**REMARKS BY DB :**

In view of the fin. condition obtain suitable assurances or guarantees.

## D&amp;B Business Information Report

Page 2 of 11

For: JOSEPH VETTICKAL  
EDUCATION - OPEXO

July 15, 2004  
6:56 am

**REGISTRATION DATA**

Legal form : Other  
Business founded : N. A.  
Business started : 2002  
VAT : 7251843739  
Statistical No. (REGON) : 473073308

**PRINCIPALS**

1. Name : Mr. Edward GABRYS  
Position : Administration Director

2. Name : Mr. Andrzej LEWINSKI  
Position : Vice Chancellor

3. Name : Mr. Pawel LIBERSKI  
Position : Vice Rector

4. Name : Mrs. Daria ORSZULAK-MICHALAK  
Position : Vice Rector

5. Name : Mr. Krzysztof ZEMAN  
Position : Vice Rector

6. Name : Mr. Ryszard GLINKA  
Position : Vice Rector

**OWNERSHIP**

1. Name : State Treasury

**ACTIVITIES**

## STANDARD INDUSTRIAL CLASSIFICATION CODES (SIC 1987)

82000000 Educational services  
82210102 University

Description : - main activity

## NACE

80.3 Higher education

## D&amp;B Business Information Report

Page 3 of 11

For: JOSEPH VETTICKAL  
EDUCATION - OPEXO

July 15, 2004  
6:56 am

**PREMISES**

Complex :  
I. Address : Ul. Kosciuszki 4, 90-419 Lodz  
prov. lodzkie, Poland  
Tenure type : unknown

**EMPLOYEES**

Size of employment (as at) :  
1,977 (31-12-2003)  
1,977 (31-12-2002)

**BANKERS**

Name : BANK POLSKA KASA OPIEKI S A O/ II LODZ  
D-U-N-S : 36-814-5087  
Address : Ul. Piotrkowska 270, 90-361 Lodz  
prov. lodzkie, Poland  
Tel. : (48-42) 681-80-62  
Fax : (48-42) 681-11-25  
Account No. : 02 12403028 1111000028221090

**FINANCIAL DATA**

Sales :  
33,292,000.00 PLN (01-10-2002 - 31-12-2002)  
Gross profit/loss :  
-1,449,900.00 PLN (01-10-2002 - 31-12-2002)  
Net profit/loss :  
-1,449,900.00 PLN (01-10-2002 - 31-12-2002)

**FINANCIAL DATA**

Sales :  
33,292,000.00 PLN (01-10-2002 - 31-12-2002)  
Gross profit/loss :  
-1,449,900.00 PLN (01-10-2002 - 31-12-2002)  
Net profit/loss :  
-1,449,900.00 PLN (01-10-2002 - 31-12-2002)

For: JOSEPH VETTICKAL  
 EDUCATION - OPEXO

July 15, 2004  
 6:56 am

**FINANCIAL STATEMENT**

-----	
Balance-sheet A	
as at :	31-12-2002
	PLN
-----	
A. Fixed Assets	84,022,800.00
I. Intangible Assets	319,400.00
1. Development Costs	0.00
2. Goodwill	0.00
3. Other Intangible Assets	319,400.00
II. Tangible Assets	0.00
1. Fixed assets	83,633,100.00
2. Fixed assets under construction	18,000.00
3. Advances Towards Fixed Assets	0.00
III. Long-term receivables	0.00
1. Internal Receivables	0.00
2. Other Receivables	0.00
IV. Long - Term Investments	70,300.00
1. Properties	0.00
2. Intangible Assets	0.00
3. Long - term financial assets	70,300.00
4. Other Long - term Investments	0.00
V. Long - term accruals	0.00
1. Assets from the postponed income tax	0.00
2. Other Accruals	0.00
B. Current Assets	22,373,700.00
I. Inventory	541,400.00
1. Materials	220,000.00
2. Work in Progress	41,500.00
3. Finished Products	243,300.00
4. Goods	36,600.00
5. Advances Toward Stock	0.00
II. Short - term Receivables	6,140,300.00
1. Receivables from Associated Companies	0.00
2. Receivables form other companies	6,140,300.00
III. Short-term investments	15,692,000.00
1. Short - term	

## D&amp;B Business Information Report

Page 5 of 11

For: JOSEPH VETTICKAL  
EDUCATION - OPEXOJuly 15, 2004  
6:56 am**FINANCIAL STATEMENT (continued)**

financial assets	15,692,000.00
2. Other short -term investments	0.00
IV. Short - term accruals	0.00
TOTAL ASSETS	106,396,500.00
A. Owner's Equity	76,852,400.00
I. Share Capital	78,302,300.00
II. Share Capital not Paid (-)	0.00
III. Own shares (-)	0.00
IV. Reserve Capital (Fund)	0.00
V. Revaluation Capital	0.00
VI. Other Reserve Capitals (Funds)	0.00
VII. Retained Profit (Loss)	0.00
VIII. Net Profit (Loss)	-1,449,900.00
IX. Charges from Financial Result	0.00
B. Reserves and Reserves for Liabilities	29,544,100.00
I. Reserves for Liabilities	0.00
1. Postponed income tax reserve	0.00
2. Reserve for pensions (other)	0.00
3. Other reserves	0.00
II. Long-term Liabilities	0.00
1. To associated companies	0.00
2. To other companies	0.00
III. Short-term liabilities	13,354,000.00
1. To associated companies	0.00
2. To other companies	9,227,700.00
III. Special Funds	4,126,300.00
IV. Accruals	16,190,100.00
1. Minus net worth of the company	0.00
2. Other Accruals	16,190,100.00
TOTAL LIABILITIES	106,396,500.00

-----  
PROFIT LOSS ACCOUNT (Comprehensive)  
as at : 31-12-2002  
PLN  
-----

A. Revenue from Sales -  
from associated companies 33,292,000.00

For: JOSEPH VETTICKAL  
EDUCATION - OPEXO

July 15, 2004  
6:56 am

**FINANCIAL STATEMENT (continued)**

I. Sales of Products	32,844,400.00
"II. Change in Products (increase - positive value; decrease - negative value)"	
III. Costs of Services for Internal Needs	0.00
IV. Sales of Goods Materials	449,700.00
B. Operating Costs	34,794,000.00
I. Depreciation	2,171,700.00
II. Supplies Power	3,899,800.00
III. Outside Services	2,990,400.00
IV. Taxes Charges (excise tax in)	891,100.00
V. Salaries Wages	15,815,500.00
VI. Social insurance and other services	3,716,200.00
VII. Other costs	5,309,300.00
VIII. Value of Goods for Resale and Materials Sold	0.00
C. Profit/Loss on Sales (A-B)	-1,502,000.00
D. Other Operating Revenue	345,600.00
I. The profit from sale of non-financial fixed assets	0.00
II. Allocations	0.00
III. Other Operating Revenue	345,600.00
E. Other Operating Costs	375,400.00
I. The loss form sales of non- financial fixed assets	0.00
II. The updated value of fixed assets	0.00
III. Other	375,400.00
F. Profit/Loss on Operating Activity (C+D- E)	-1,531,800.00
G. Financial Revenue	201,800.00
I. Revenue from shares (also from associated companies)	0.00
II. Received Interest (also from associated companies)	198,200.00
III. Profit from sale of investment	0.00
IV. The update of Investment's value	0.00
V. Other	3,600.00
H. Financial Costs	119,900.00
I. Interests to pay	

## D&amp;B Business Information Report

Page 7 of 11

For: JOSEPH VETTICKAL  
EDUCATION - OPEXOJuly 15, 2004  
6:56 am*FINANCIAL STATEMENT (continued)*

(also for associated companies)	1,300.00
II. The loss from sale of investments	0.00
III. The Update of Investment's Value	0.00
IV. Other	118,600.00
I. Profit/Loss on Business Activity (F+G-H)	-1,449,900.00
J. The result of extraordinary events	0.00
I. Extraordinary Profits	0.00
II. Extraordinary Loss	0.00
K. Gross Profit/Loss (I-J)	-1,449,900.00
L. Income Tax	0.00
M. Other Obligatory Deductions	0.00
N. Net Profit/Loss (L-M)	-1,449,900.00
-----	
Cash Flow (Indirect method) as at :	31-12-2002 PLN
-----	
A. Cash Flow From Operating Activity	-3,739,658.80
I. Net Profit	-1,449,895.99
II. Corrections	-2,289,762.81
1. Depreciation	
Amortisation	11,845,639.35
2. Income/Expense on Exchange Rate	0.00
3. Rates of Interests Gained Paid	0.00
4. Profit (loss) from investment's activity	0.00
5. Change in Reserves	-4,094.58
6. Change in Stock	270,847.44
7. Change in Receivables	885,304.33
8. Change in Current Liabilities except credits and loans	-283,259.76
9. Change in Accruals	-20,263,714.46
10. Other Items	5,259,514.87
III. Net Cash Provided by Operating Activities	-3,739,658.80
B. Cash Flows from Investing Activities	-561,495.57
I. Incomes	1,848.53
I. Sale of Accruals and Intangible Assets	1,848.53
II. Sale of	

For: JOSEPH VETTICKAL  
 EDUCATION - OPEXO  
 July 15, 2004  
 6:56 am

*FINANCIAL STATEMENT (continued)*

Investment in Property and Accruals	0.00
III. Sale of financial Assets	0.00
4. Other Investment Incomes	0.00
II. Expenses	563,344.10
1. Purchasing the Accruals and Tangible Assets	563,344.10
2. Investments in Properties and Accruals	0.00
3. Expenses on Financial Assets:	0.00
4. Other Investment Expenses	0.00
III. Net Cash provided by Investment Activity	-561,495.57
C. Cash Flow from Financial activity	0.00
I. Incomes	0.00
1. Net Incomes from shares issue	0.00
2. Loans and Credits	0.00
3. Issue of Bonds	0.00
4. Other Financial Incomes	0.00
II. Expenses	0.00
1. Purchasing of the own Shares	0.00
2. Dividends	0.00
3. Other Payments	0.00
4. Loans and Credits repayments	0.00
5. Purchase of Bonds issued	0.00
6. Due to other Financial Liabilities	0.00
7. Leasing Payments	0.00
8. Interests	0.00
9. Other Financial Expenses	0.00
III. Net Cash from Financial Activity	0.00
D) Net Cash (A.III.-B.III.-C.III)	-4,301,154.37
E. Decrease/Increase in Cash Cash Equivalents	0.00
F. Cash Cash Equivalents, Beginning	

## D&amp;B Business Information Report

Page 9 of 11

For: JOSEPH VETTICKAL  
EDUCATION - OPEXOJuly 15, 2004  
6:56 am*FINANCIAL STATEMENT (continued)*

of Year	19,993,143.87
G. Cash Cash Equivalents, End of Year (F-D)	15,691,989.50

## REMARKS BY DB :

Subject has not yet published its financial statement for 2003 r.

*RATIOS*

Balance-sheet A for the period :	01-10-2002 31-12-2002
-------------------------------------	--------------------------

Net Worth Ratio	8.29
Total debt ratio (x 100)	0.09
Long-term liabilities to outside capital ratio (x 100)	0.00
Debt to Equity ratio	0.12
Current Ratio	2.42
Long-term debt ratio II (x 100)	0.00
Return on equity (ROE)	-0.02
Return on assets (ROA)	-0.01
Long-term debt ratio	0.00
Total Assets (PLN)	106,396,500.00
Net Worth (PLN)	76,533,000.00
Working Capital (PLN)	-7,170,400.00

PROFIT LOSS ACCOUNT (Comprehensive) for the period :	01-10-2002 31-12-2002
---	--------------------------

Sales incomes (PLN)	33,292,000.00
Gross Profit/Loss (PLN)	-1,449,900.00

*SLOW PAYMENTS INDICATORS*

Month	Concentration Indicators	Risk Indicators
2004 2	C	0
2004 1	B	0
2003 10	B	0

Description of concentration indicators.

A, B, C, D, E indicates following overdue ranges:

## D&amp;B Business Information Report

Page 10 of 11

For: JOSEPH VETTICKAL  
EDUCATION - OPEXOJuly 15, 2004  
6:56 am**SLOW PAYMENTS INDICATORS (continued)**

A	B	C	D	E
1-30 days	31-60 days	61-90 days	91-120 days	beyond 120 days

+ indicates ageing of the other overdue payments registered

Description of risk indicators.

0- registered overdue payments do not effect financial condition of the subject

1-minimal risk, registered overdue payments do not effect financial condition of the subject

2-increased risk referred to overdue payments, suggested monitoring

3-high risk referred to overdue payments, suggested monitoring

4-very high risk, additional form of credit guarantees recommended

5-registered overdue payments effect financial liquidity of the subject

Lack of the trade scoring indicator reflects shortage of financial data enabling correct estimation of the risk

**ADDITIONAL INFORMATION**

Podmiot rozpoczął działalność 1-10-2002.

Powstał z mocy ustawy Sejmu z 27-07-2002 po połączeniu Akademii Medycznej w Łodzi i Wojskowej Akademii Medycznej

Na uczelni studiuje 5184 studentów; zatrudnionych jest 125 profesorów tytułarnych, 104 doktorów hab. 125 doktorów nauk

W strukturze uczelni znajduje się 7 uniwersyteckich szpitali klinicznych, 9 instytutów, oraz 36 katedr

Planowane jest rozpoczęcie nauczania medycyny w języku angielskim dla studentów zagranicznych

**CONCLUSION**

D-U-N-S : 36-820-0841  
Registered Name : UNIWERSYTET MEDYCZNY W ŁODZI  
Operating Address : Ul. Kosciuszki 4, 90-419 Łódź  
prov. łódzkie, Poland

## SECTION :

IDENTIFICATION

IDENTIFICATION

IDENTIFICATION

DB Rating : 4A4  
Condition : POOR  
Maximum credit : Not advised

EVALUATION BY DB

EVALUATION BY DB

EVALUATION BY DB

Sales : 33,292,000.00 PLN (01-10-2002 - 31-12-2002)

FINANCIAL DATA

Net profit/loss : -1,449,900.00 PLN (01-10-2002 - 31-12-2002)

FINANCIAL DATA

For: JOSEPH VETTICKAL  
EDUCATION - OPEXO

July 15, 2004  
6:56 am

*CONCLUSION (continued)*

REMARKS BY DB :

In view of the fin. condition obtain suitable assurances or guarantees.

EVALUATION BY DB

Business started : 2002  
Legal form : Other

REGISTRATION DATA  
REGISTRATION DATA

Main activity : 82210102 University [Educational services]

ACTIVITIES

Employees : 1,977 (31-12-2003)

EMPLOYEES

Contact with the subject :

Name : Ksiegowosc  
Telephone No. : 4842 6393911  
Date : 14-07-2004  
Refused : Financial  
Result : Statement Requested

-- END OF REPORT --

# Index Sheet

Ope Id No: 03850500

School Name: MEDICAL UNIVERSITY OF LODZ

Subfolder: Eligibility & Certification Correspondence

Doc Type: Miscellaneous

Rec Date:

Org Date: 05/18/2004

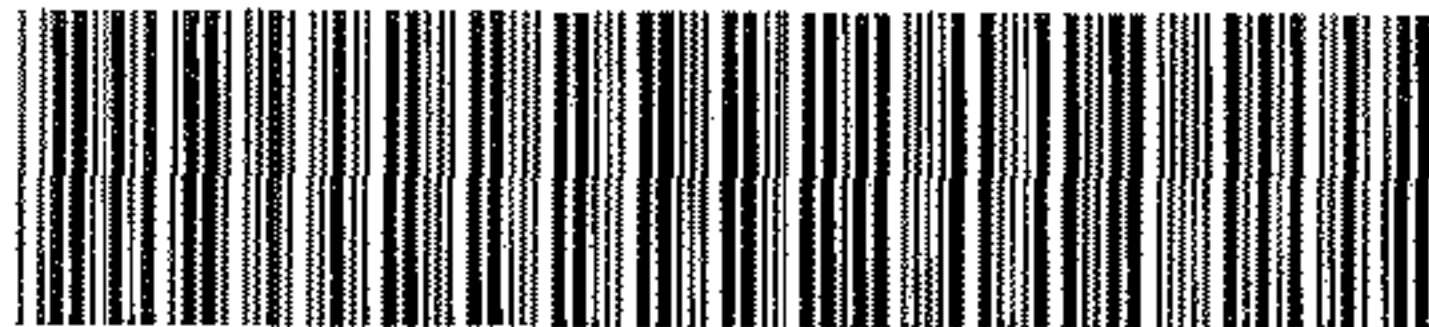
School Year: 2004

ACN:

PRCN:

Box Id: FS75

Unique ID: SC1000000366342



**EPLS**

Excluded Parties Listing System



★ Search Menu -  
Current Exclusions

- ▶ Name
- ▶ Multiple Names
- ▶ DUNS
- ▶ Agency
- ▶ State/Country
- ▶ Action Dates
- ▶ Termination Dates
- ▶ Exact Name and SSN/TIN

★ Archive Menu -  
Past Exclusions

- ▶ Name
- ▶ Multiple Names

★ SDN and Blocked  
Persons List - Terrorist  
& Drug Trafficking

- ▶ Denied Persons List
- ▶ Entity List

★ View Agency  
Contacts

- ▶ Debar Maintenance
- ▶ Administration
- ▶ Upload Login

★ FAQ

- ▶ Reports Menu
  - ▶ Lists Report
  - ▶ Supplemental Report
  - ▶ Agency Report
  - ▶ Supplemental Agency Report
  - ▶ State/Country Report
  - ▶ Lists Data Report
  - ▶ Supplemental Data Report
  - ▶ Cause and Treatment Code

★ View Cause and  
Treatment Code  
Descriptions

- ▶ Reciprocal Codes
- ▶ Procurement Codes
- ▶ Nonprocurement Codes

★ Contact Information

- ▶ Email: support@epls.gov
- ▶ Phone: 1-866-GSA-EPLS  
(1-866-472-3757)

**Search Results for Parties Excluded**

**Multiple Partial Name(s) :**  
**Prof. Dr. Andrzel Lewinski M.D.;**  
**Dr. Andrzel Lewinski;**  
**. Andrzel Lewinski;**  
**Lewinski Andrzel;**  
**Andrzel Lewinski M.D.;**

**As of 18-May-2004**

No records were found matching this criteria.





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- ▶ Reciprocal Codes
- ▶ Procurement Codes
- ▶ Nonprocurement Codes

★ Contact Information

- ▶ Email: support@epls.gov
- ▶ Phone: 1-866-GSA-EPLS  
(1-866-472-3757)

**Search Results for Parties Excluded**

**Multiple Exact Name(s) :**  
**Prof. Dr. Andrzel Lewinski M.D.;**  
**Dr. Andrzel Lewinski;**  
**. Andrzel Lewinski;**  
**Lewinski Andrzel;**  
**Andrzel Lewinski M.D.;**

**As of 18-May-2004**

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★ **SDN and Blocked Persons List - Terrorist & Drug Trafficking**

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★ **View Cause and Treatment Code Descriptions**

- ▶ Reciprocal Codes
- ▶ Procurement Codes
- ▶ Nonprocurement Codes

★ **Contact Information**

- ▶ Email: support@epis.gov
- ▶ Phone: 1-866-GSA-EPLS (1-866-472-3757)

**Search Results for Parties Excluded**

**Multiple Exact Name(s) :**  
**Prof. Dr. Andrzel Lewinski M.D.;**  
**Dr. Andrzel Lewinski;**  
**Andrzel Lewinski;**  
**Lewinski Andrzel;**  
**Andrzel Lewinski M.D.;**

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  - ▶ Email: support@epls.gov
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### Search Results for Parties Excluded

**Multiple Partial Name(s) :**  
**Prof. Dr. Andrzel Lewinski M.D.;**  
**Dr. Andrzel Lewinski;**  
**Andrzel Lewinski;**  
**Lewinski Andrzel;**  
**Andrzel Lewinski M.D.;**

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- ▶ Phone: 1-866-GSA-EPLS (1-866-472-3757)

**Search Results for Parties Excluded**

**Multiple Partial Name(s) :**  
**Dr. Jan Wilczynski M.D.;**  
**Jan Wilczynski M.D.;**  
**Jan Wilczynski;**  
**Wilczynski Jan;**  
**Dr., M.D. Jan Wilczynski;**

**As of 18-May-2004**

No records were found matching this criteria.





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**Search Results for Parties Excluded**

**Multiple Exact Name(s) :**  
**Dr. Jan Wilczynski M.D.;**  
**Jan Wilczynski M.D.;**  
**Jan Wilczynski;**  
**Wilczynski Jan;**  
**Dr., M.D. Jan Wilczynski;**

**As of 18-May-2004**

No records were found matching this criteria.





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- ▶ Phone: 1-866-GSA-EPLS (1-866-472-3757)

## Search Results for Parties Excluded

**Multiple Partial Name(s) :  
Dr. Chaitanya Kadiyala M.D.;  
Dr. Chaitanya Kadiyala;  
Chaitanya Kadiyala;  
Kadiyala Chaitanya;  
Jay Kadiyala;**

**As of 18-May-2004**

No records were found matching this criteria.





**UNITED STATES DEPARTMENT OF EDUCATION**

**FEDERAL STUDENT AID  
SCHOOL ELIGIBILITY CHANNEL  
FOREIGN SCHOOLS CASE MANAGEMENT TEAM**

Prof. Dr Andrzej Lewinski M.D.  
Rector, Medical University of Lodz  
Medical University of Lodz  
4, Kosciuszko Av.  
Lodz 90-419  
Poland

**OPE ID 03850500**

Dear Prof. Dr Lewinski:

The Foreign Schools Case Management Team has completed its review of Medical University of Lodz's (Institution) application to participate in the Title IV, HEA programs.

Based on that review, the Foreign Schools Case Management Team has granted Provisional Certification not to exceed June 30, 2006 to the Institution. The reasons for and the conditions of your Provisional Certification are described in the Provisional Program Participation Agreement (PPA).

No later than March 31, 2006 the Institution must reapply to continue its participation in the Title IV HEA programs. At that time, a determination will be made whether the Institution meets the requirements for full certification.

Two final steps are necessary to complete the certification process:

First, Medical University of Lodz must print, review, sign and return two copies of the Program Participation Agreement (PPA) to the following address:

United States Department of  
Education  
Federal Student Aid, Schools Channel  
  
Attention: Foreign Schools Case  
Team  
Union Center Plaza, 73C3  
830 First Street, NE  
Washington, DC 20202-5340

Second, after the signed copies of the PPA are received from you, we will generate an Eligibility and Certification Approval Report (ECAR). The ECAR will summarize the critical elements of the Institution's approved application. The ECAR will also identify

Medical University of Lodz's highest level of offering, any nondegree programs and any additional locations which are Title IV, HEA eligible.

Medical University of Lodz  
03850500

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