

**VA Form 22-1998**

**Name:** INSTITUTE OF EPIDERMAL CELL THERAPY

Mailing Address

**Address 1:** 445 NORTH BATTLEFIELD BLVD

**Address 2:** SUITE O

**Address 3:**

**City/State/Zip:** CHESAPEAKE, VA 23320

**County:**

**Foreign Postal Code:**

**State/Province:**

**Country:** USA

**Mil. Post Office:**

**Mil. Address:**

Physical Address

**Address 1:** 445 NORTH BATTLEFIELD BLVD

**Address 2:** SUITE O

**Address 3:**

**City/State/Zip:** CHESAPEAKE, VA 23320

**County:**

**Foreign Postal Code:**

**State/Province:**

**Country:** USA

**Mil. Post Office:**

**Mil. Address:**

**Phone: Type Number**

Daytime (757) 818-1577

**E-Mail:** SAPHONIAGEE@ESTHETICSTHERAPY.COM

**Facility Code:** 25013346

**Status:** Approved on  
04/19/2023

**Revision Date:** 04/19/2023

**App Law:** 0 - Not Approved

**Branch Location:** N

**Preferred Provider:** N

**Advanced Payments:** N

**VA Checks To:** N

**IHL Exempt:** N

**Catalog: Catalog Years**  
3 2023-2024

**Full Time Undergraduate:**

**Full Time Clock Modifier:**

**Graduate:**

**Enrollment Limit:** 18

**Enrollment Limit Indicator:** All Courses Limited

**Course Limit:** 2

**Distance Learning:** N

**Cooperative:** N

**Practical Training:** N  
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<b>Remedial Training :</b> N	<b>Accreditation:</b> N	<b>Consortium:</b> N
<b>Air Agency Cert. Date:</b>	<b>Title VI:</b> No Authority	<b>VA-ONCE:</b> N
<b>Reporting Fee Bar:</b> Payment Barred	<b>Pay List:</b> N	<b>Registered APP:</b> N
<b>National Approval:</b> N	<b>IHL with Flight:</b> N	<b>Executive Order</b> N <b>13607:</b>
<b>Federal Approval:</b> N	<b>Priority</b> N <b>Enrollment:</b>	<b>Online Only:</b> N
<b>Independent Study:</b> N	<b>STEM:</b> N	

**Remarks:** 09-12-2023 CAT 23-24 NEW APP PER SAA LTR 08-14-23 EFF 04-19-23.

**Main, Branch & Extension Campus Facility Codes**

Campus Name	Facility Code	Campus Indicator
INSTITUTE OF EPIDERMAL CELL THERAPY	25013346	M

**Read Only Certifying Officials**

Name	Title	Phone	Email	Status	Priority
L SAPHONIA GEE	PRESIDENT CEO	757 818- 1577	SAPHONIAGEE@ESTHETICSTHERAPY.COM	APRVD	Primary

**NCD Programs**

Code	Type	Description	Length	Mode	Full Time Mode	Effective Date	Withdrawal
431	D	DIP-ESTHETICS	600	C	18	C	04/19/2023

**Remarks:**

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431	D	DIP-MASTER ESTHETICS	600	C	18	C	04/19/2023
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**Remarks:**

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<i>James S. Quisenberry</i>	09/13/2023
ELR or Designee	Date