Education & Examinations Division

QE Provider Application Checklist - 4-year Renewal

Provider Name:	Provider License #:
1. Provider Information:	
Complete all fields	
\Box List other states where provider is approved to offer real estate,	inspector or ERW QE courses, if applicable
2. Course Information:	
Proposed location of classes, check all that apply	
Source of curriculum listed, must be name of individual or organi	zation
3. Authorized Signers:	
Name and signature of individuals authorized to sign education c	redit forms and certificates for provider
4. Operations Manager:	
Complete all fields	
Complete a Principal Information Form	
5. Records Manager:	
Complete all fields	
For Out-of-State Applicants:	
Include notarized Power of Attorney	
6. Business Information:	
Select one business type	
Using an Assumed Name? Yes No	
If YES , include a copy of recorded assumed name certificate	
For Corporations or LLCs:	
Complete all fields and include the following:	
Franchise Tax Account Status page (chartered in Texas)	
Certificate of Fact (chartered in another state)	
Principal Information Form for each individual listed	
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6. Business Information: (continued)		
For Trade Associations:		
Complete all fields and include the following:		
Copy of formation documents and IRS letter		
List of board of directors and their terms of service		
<u>Principal Information Form</u> for each director		
7. Background Information:		
Answer all legal questions		
Complete a <u>Background History Form</u> , for YES answers		
8. Items required to complete this application:		
a) Original Bond:		
Original \$20,000 <u>bond</u> with raised or original seal and payable to the Commission		
b) Pre-Enrollment Agreement including:		
Tuition		
Itemized list of fees for supplies, materials, books, etc.		
Attendance Requirements		
Make-up Procedures including time limits and fees		
Refund Policy including a statement for when a student is dismissed or withdraws		
Final Exam Proctoring procedures and fees (closed-note/closed-book)		
Makeup Final/Re-exam procedures, fees, time limits		
Criminal History (Fitness Determination) Notice		
Signatures for Provider and Student		
c) Sample of advertisement:		
Clearly reflects the provider name, course titles, course numbers and number of credit hours. If fees are charged, fees are displayed in a clear and consistent manner.		
No prohibited practices - see <u>§535.65(c)</u>		
Certification Statement:		
Name and signature of Owner (required)		
Name and signature of Operations Manager (required)		