



Texas Real Estate Commission

P.O. Box 12188
Austin, Texas 78711-2188
www.trec.texas.gov
512 936-3000

Education Provider Annual Fee Application

(To be used by qualifying real estate or inspector course providers)

| FEE | RECEIPT NUMBER | AMOUNT | \$ TYPE | App# | File# |
|----------------------------|----------------|----------|---------|----------|-----------|
| Application Processing Fee | | \$200.00 | | Entity # | License # |

DO NOT WRITE ABOVE THIS LINE

All Information Must Be Typed or Printed in Ink

1. Provider Name _____ Provider Number _____

2. Street Address _____

3. Mailing Address _____

4. Phone No. _____ Fax No. _____

5. Web Address _____

6. Email Address _____

7. Has the education provider or its Operations Manager ever had a professional or occupational license in this state or any other state disapproved, suspended, canceled or revoked, or ever surrendered such a license? ☐ Yes ☐ No

8. Are there any judgements, petitions or liens against the school's programs that involve obtaining or maintaining an occupational license? ☐ Yes ☐ No

If the answer to questions 7 or 8 is YES, complete the applicable sections of the Background History Form located at www.trec.texas.gov

9. Persons associated with the provider authorized to sign course completion documents.

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

☐ I have included copies of advertising materials that have been used within the last year or screen shots of website content.

The information contained here is true and correct. I understand that approval to be an education provider may be withdrawn for noncompliance with the Real Estate License Act or the Rules of the Texas Real Estate Commission.

_____ Operations Manager Printed Name _____ Signature _____ Date _____