

REAL ESTATE COMMISSION
State of Hawaii
Professional and Vocational Licensing Division
Department of Commerce and Consumer Affairs
335 Merchant Street, Room 333
Honolulu, Hawaii 96813

FOR OFFICE USE ONLY	
Approved/Date:	Registration No.:
Denied/Date:	
Cashier's Validation:	

APPLICATION FOR CONTINUING EDUCATION PROVIDER REGISTRATION

1. Provider's:

Name: _____

Address: _____

Telephone: _____

2. School Administrator's:

Name: _____

Business Address: _____

Telephone: _____

Email: _____

Mailing Address _____

3. List of courses to be offered, if known:

4. **Submit the following documents:**

- a. Signed "Certification of Administrator of Continuing Educator Provider" form.

For	App	\$150	905
Cashier's Use	CRF	\$90/\$45	583
Only	Serv Fee	\$25	BCF

- b. A Surety Bond in an amount based on the formula in Hawaii Administrative Rules ("HAR") §16-99-99(a)(7) or an alternative form of security as described in HAR §16-99-53.1 (see attachment). Use the attached bond form. Other bond forms and re-typed versions are not acceptable.
- c. School catalogue or brochure to include advertising content and media to be used.
- d. Statement of School Policies and Student Disclosure Statement (see attachment) to include a copy of:
 - Student Registration contract, or School/Student agreement giving right of cancellation within a specified time period
 - Attendance record or other method of monitoring class attendance
 - Policy for passing grade and for re-exams (if any) and issuance of completion certificate
 - All textbooks and course materials owned by this provider, including course updates to materials
 - Location of records and record keeping procedures for a minimum of 4 years
- e. Signed "Consent" forms (included herein).

School Ownership.

5.

- Form of ownership:**
- Corporation
 - Partnership
 - Sole Proprietorship
 - Limited Liability Company (LLC)
 - Limited Liability Partnership (LLP)
 - Accredited institution of higher learning (college, university)

Corporation: a. List names and mailing addresses of all persons who own 5% or more of the corporate stock:

b. Submit a "Certificate of Good Standing" issued by the Business Registration Division, Dept. of Commerce and Consumer Affairs, 335 Merchant Street, 2nd Floor, Honolulu, Hawaii, Phone: 586-2727. A "filestamped" copy of the articles of incorporation dated within the last 6 months may be submitted for the "Certificate of Good Standing".

Partnership: a. List names and mailing addresses of each partner:

b. Submit a "Certificate of Good Standing" issued by the Business Registration Division - see "**Corporation**" documents stated above.

Sole Proprietor: Name and mailing address: _____

LLC: a. List names and mailing addresses of each member:

b. Submit a "Certificate of Good Standing" issued by the Business Registration Division - see "**Corporation**" documents stated above.

LLP: a. Name and mailing addresses of each partner:

b. Submit a "Certificate of Good Standing" issued by the Business Registration Division - see "**Corporation**" documents stated above.

6. Have owner(s) ever applied for/held/been granted a certification/registration/license for teaching or instruction in this state or any other state? YES NO

If "YES", provide name of institution/state, effective dates, and a copy of the certificate/registration/license: _____

7. List the **name, real estate license number, and license status** of all owners, administrators, employees or general partners who hold a Hawaii real estate license:

Name	Real Estate License Number	License Status

8. CHECK ANSWERS TO ALL QUESTIONS AND EXPLAIN ALL "YES" RESPONSES ON A SEPARATE SHEET.

Questions refer to the applicant (i.e., individual or entity) **and** to the administrator of the provider:

a. 1) Have you ever applied for, been granted, or held a real estate license in Hawaii or any other state? YES NO

If yes, what state, license type, and license number? _____

2) Has an application for license or a real estate license ever been denied, suspended, fined, involuntarily terminated, revoked, or otherwise subjected to disciplinary action? YES NO

- 3) Have any complaints or charges ever been filed against you, regardless of outcome, with the licensing agency of any state? YES NO
- 4) Have any charges of unlicensed activity ever been filed against you, regardless of outcome, with the licensing agency of any state? YES NO
- 5) Are there any pending disciplinary actions against you? YES NO
- b. During the past 20 years have you ever been convicted of a crime where there has not been an order annulling or expunging the conviction? YES NO
- c. Are there any pending lawsuits, unpaid judgments, outstanding tax obligations, or any other type of involuntary liens against you? YES NO
- d. Are you LESS than 18 years of age? YES NO
- e. Are you an alien without authorization to work in the United States? YES NO

Explain all "Yes" responses on a separate sheet with detailed information and submit supporting documents (see instruction sheet for documents to be submitted). Any "Yes" answers to the questions in Section 10 of the application will require review by the Real Estate Commission before a decision is made regarding registration.

Certification of Applicant:

I hereby certify that:

- 1) Each instructor that teaches for the Provider meets the Real Estate Commission's requirements and that the Provider has on file a signed Statement of Ethical Teaching Practices for each instructor who teaches for the Provider.
- 2) The statements and answers on this application and accompanying document(s) are true and correct.

I understand that any statement false or untrue, or any material misstatements of fact shall constitute grounds for refusal or subsequent revocation of registration.

Signature of Administrator

Signature of Officer/Member/Partner/Sole Proprietor

Print Name

Print Name

Date

Date