

| FORM HI-CE | | | | | |
|-----------------|--|--|--|--|--|
| Board Approved: | | | | | |
| Course #: | | | | | |
| New Exp Date: | | | | | |
| Board Denied: | | | | | |
| | | | | | |

State Board of Appraisers, Abstracters, and Home Inspectors

900 W Capitol Ave, Ste 400, Little Rock, AR 72201 501-296-1843

www.labor.arkansas.gov

| Pymt Type | Ck Date | Ck# | Amt | Processed Date/By | | | |
|------------------------------|---------|-----|-----|-------------------|--|--|--|
| DO NOT WRITE ABOVE THIS LINE | | | | | | | |

HOME INSPECTOR CONTINUING EDUCATION **COURSE APPROVAL APPLICATION – INITIAL OR RENEWAL**

| | advertised or offered as approved until such approval is granted by the State Board of ters, and Home Inspectors. Please submit a separate application for each course. | | | | | |
|---|---|--|--|--|--|--|
| Name of Provider | | | | | | |
| Address | | | | | | |
| City, State, Zip | | | | | | |
| Contact Person | Phone | | | | | |
| Email Address | | | | | | |
| Initial Renewal | Previous Approval # and Exp Date | | | | | |
| COURSE TITLE EVENT NAME (if present offering multiple) | | | | | | |
| COURSE DELIVERY | Classroom Only Classroom & Synchronous Online/Asynchronous | | | | | |
| List Date(s) and Location(s) | of Classroom (on-site) Courses. Attach a separate list if more space is needed. | | | | | |
| DATE | LOCATION | | | | | |
| DATE | LOCATION | | | | | |
| DATE | LOCATION | | | | | |
| INSTRUCTOR(S) | | | | | | |
| Y N Has t | the Board previously approved the above instructor(s)? | | | | | |
| Course Description | (as advertised): | | | | | |

(continued on p 2)

| Plea | ase mail the following to the address at | the top of page 1: | | | | |
|---------|---|-----------------------------------|--|--|--|--|
| | Course Approval Application | | | | | |
| | Check for the appropriate fee: Initial qualifying fee (Includes first Additional course filing fee: \$25.0 Annual renewal fee per course: \$25.0 ***PLEASE NOTE: Fees must account | 00 for first year \$25.00/year | | | | |
| Plea | ase email the following additional cours | se materials to jimmie.sue.puc | kett@arkansas.gov: | | | |
| | Course Outline - A detailed outline/lesson plan must be submitted in the format of a standard business graduated outline setting forth all course subtopics in such detail as would be required by an alternate instructor to ensure that all material is covered. Digital slideshow images, or images of Internet online course screens, shall not suffice for this requirement. | | | | | |
| | Digital Presentations - A full portable digital version of any classroom slideshow presentation must be submitted for each course, if one is used. Digital presentation content and order must coincide with a course outline provided. | | | | | |
| | Distance Learning Presentations - A full portable digital version, or the Internet address, of all distance learning presentations, including but not limited to web pages or video presentations must be submitted for each course if utilized. Distance learning presentation content and order must coincide with the cours outline provided. | | | | | |
| | Instructor Credentials - A standard pr providing a complete chronological hi relevant certifications including effect biographies shall not be considered. | istory of relevant employment | and teaching experience, along with | | | |
| | Student Materials - A copy of all print by the attendee to qualify for success | • | sented to or required to be purchased nust be submitted. | | | |
| | Course Completion Certificate - A sar the student's successful completion o title, course approval number, deliver | of training. The certificate must | contain the name of student, course | | | |
| submit | CICATE OF COMPLIANCE: I certify that I sted course materials to the best of my es and Rules of the State Board of Appr | knowledge and belief. I also at | • • | | | |
| Signa | ature of Official | Title | Date | | | |
| | indersigned notary public, certify that t vledged signing the foregoing instrume | • | • | | | |
| | day of (r | month) | | | | |
| | | | | | | |
| Ctata - | ·£· | | y Public Signature | | | |
| | rf: r of: | | | | | |
| | mmission expires: | _ | | | | |
| .viy CO | | | | | | |