REAL ESTATE CONTINUING EDUCATION SPONSOR REQUEST FOR APPROVAL OF SIGNIFICANT CHANGE(S)

State Form 50664 (11-01)

INDIANA PROFESSIONAL LICENSING AGENCY
302 WEST WASHINGTON STREET, ROOM E034
INDIANAPOLIS, IN 46204

NOTE: A/T/D for office use.

Name of sponsor	Date (*month, day, year*)

1) NAME OF NEW DIRECTOR: [*Include verification of degree (transcript) if applicable, and resume' indicating qualifications*]

	A/T/D

2) INSTRUCTOR(S) : (*Attach an instructor application for all instructors not previously approved. Do not indicate instructors that have been previously approved for you. Check the "PA" box for instructors previously approved for another sponsor*)

INSTRUCTOR NAME(S)	PA	A/T/D	INSTRUCTOR NAME(S)	PA	A/T/D

3) COURSE(S) : (*Include detailed outline for each course*) Indicate number of elective hours in the "E Hours" box. Indicate number of mandatory hours in the "M Hours" box. Check the P-A box if the same outline has been previously approved for another sponsor. Indicate by number which course subject each course qualifies under in the Q box as follows: (1) Licensure and escrow law (2) Agency law (3) Civil rights law (4) Listing contracts and purchase agreements (5) Settlement procedures (6) Antitrust (7) Ethics and professional standards (8) Property management, including lease agreements, accounting procedures, management contracts (9) Timeshares, condos and coops (10) Industrial brokerage and leasing (11) Investment real estate analysis (12) Appraising (13) Farm property management (14) Commercial brokerage and leasing (15) Financing (16) Residential brokerage (17) Land development (18) Legislative issues affecting the real estate practice (19) Other.

COURSE TITLE(S)	E-HOURS	M-HOURS	PA	Q	A/T/D

4) Is the course(s) going to be offered in a real estate broker or salesperson office? ☐ Yes ☐ No

COUNCIL COMMENTS:

SIGNED:

Use additional forms as needed