

Initial Fee.....\$650.00
(Personal, Company Checks Accepted)



LOUISIANA REAL ESTATE COMMISSION
P. O. Box 14785, Baton Rouge, LA 70898-4785
1-800-821-4529 (in state only) or (225) 925-1923

APPLICATION FOR REAL ESTATE SCHOOL CERTIFICATE OF AUTHORITY

SCHOOL NAME: _____ TAX ID NUMBER: _____

Physical Address: _____
Street City State Zip

Mailing Address: _____
Street/Post Office Box City State Zip

Telephone Number(s): _____ School Director: _____

Type of Organization: Proprietorship Corporation Partnership LLC Non-Profit

ATTACHMENTS:

1. If applying as a corporation, partnership or limited liability company (LLC), include with this application a copy of the Registration Certificate issued by the Louisiana Secretary of State's office. If licensed as an out-of-state corporation or LLC, please include a copy of duplicate Certificate of Authority, or, if licensed as an out-of-state partnership, a copy of the Certificate of Partnership Registry as registered with the Louisiana Secretary of State's office. Any Trade Name or Trademark to be used in connection with this business must be registered with the Louisiana Secretary of State's office and a copy of the Registration Certificate included with this application.
2. Initial fee of \$650.00 made payable to the Louisiana Real Estate Commission
3. Financial statement of the person, partnership, corporation or LLC seeking the Certificate of Authority
4. A surety bond as issued by an insurance company authorized to do business in this state, conditioned for the protection of the contractual rights of those students attending such school and in the amount of \$10,000.00
5. Letters of reference relating to applicant's integrity, character and responsibility
6. A proposed student contract to be used by the school
7. List of primary instructors - (Please include a detailed resume' for each non-state certified instructor.)

Real estate and related experience: List any experience and credentials you wish to be considered by the Commission in evaluating your application.

APPLICATION FOR REAL ESTATE SCHOOL CERTIFICATE OF AUTHORITY Continued....

Course Information: Please indicate which courses you plan to offer, if approved.

SALESPERSON 101

BROKER 201

BROKER 202

BROKER 203

Principal School Location:

Street Address	City	State	Zip
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Branch School Location(s)

Street Address	City	State	Zip
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Street Address	City	State	Zip
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Street Address	City	State	Zip
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Tuition Costs:

Course 101: _____ Cost: _____ Course 201: _____ Cost: _____

Course 202: _____ Cost: _____ Course 203: _____ Cost: _____

List any additional expenses to be incurred by student:

Indicate School policy regarding student certification.

- Pass/Fail Policy: _____
- Attendance/ Missed Classes Policy: _____

STATE OF: _____, PARISH/COUNTY OF: _____

_____, being duly sworn, according to law, deposed and said that he,(she)

(they) is (are) the owner(s) or an officer of _____, and that the statements contained in this application and all supplementary information, including all forms as attached, submitted to the Commission for the purpose of obtaining a Certificate of Authority to operate a real estate school, are true and correct in all particulars to the best of his (her) (their) knowledge.

SWORN TO AND SUBSCRIBED BEFORE ME, a Notary Public, this _____ day of _____, _____

Name of School	Witness
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Signature of School Owner	Witness
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Signature of Co-owner, if applicable	Notary
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