

## North Carolina Auctioneer Licensing Board 108 Ber Creek Drive

Fuquay-Varina, NC 27526

Phone: (919) 567-2844 Fax: (919) 567-2865 Website: www.ncalb.org email: info@ncalb.org

Staff use only	
Date received	
Date approved	
Coordinator Name	

## **Renewal Application for Continuing Education Sponsor**

Sponsor and CE Coordinator must read 21 NCAC .04B 0800 - Continuing Education prior to completing this application.

**Proposed course:** Course must include an objective, outline and detail description and topics contained within the course as well as a description of topics as set forth in 21 NCAC 04B .0801(b). Provide any handouts to be used and presentation materials.

**Application for instructor approval:** Approval of course instructor must be completed simultaneously with course approval as set forth in 21 NCAC 04B .0804. The application is attached. Biography and/or resume of instructor, including education background information and/or experience is required.

Official Name of Sponsor:					
Applicant's Name:  (Owner)	Print Full Nam	ne			
Official Name of Course:					
Credit Hours of Course:	lit Hours of Course: Method of Instruction: (Online/Classroom)				
Sponsor's Physical Address:					
Sponsor's Mailing Address:  (If different from above)					
Sponsor's Telephone Number:	(Include area code)	Alternate Number:	(Include area code)		
Sponsor's Email :		Website:			

Continuing Education Coordinator Information: 21 NCAC 04B .0805(e) requires a course sponsor to designate one person to serve as the continuing education coordinator who is responsible for supervising the conduct of all Board approved continuing education courses; signing the course completion certificate; submitting to the Board all required rosters, reports and any other additional information required to maintain approval as a continuing education provider. Continuing Education Coordinator Name: \_\_\_\_\_ (Print full name) \_\_\_\_ Email: \_\_\_\_ Address: (City) (State) Telephone Number: \_\_\_\_\_\_ Alternate Telephone Number: \_\_\_\_\_\_ (Include area code) (Include area code) Coordinator Signature: This affidavit is to be executed before a notary public. The undersigned, in making application to the North Carolina Auctioneer Licensing Board, swears (or (a) That he/she is the legal owner of the proposed program or has obtained permission to use the pro-(b) That he/she has read and understands the North Carolina Auctioneer Licensing Law and the Rules and Regulations of the Licensing Board; (c) That he/she agrees to abide by the North Carolina Auctioneer Law and Rules; (d) That the answers and information contained herein are true to the best of his/her knowledge and belief: (e) That he/she understands that any omissions, inaccuracies or failures to make full disclosures may be deemed sufficient reason to deny approval of proposed course sponsorship, to withhold renewal of proposed course sponsorship, or suspend or revoke approval of course sponsorship. Signature of applicant: Sworn and Subscribed to before me this day of , 20 (Name of Notary Public) (Signature of Notary Public)

(AFFIX SEAL)

My Commission Expires

County \_\_\_\_\_ State \_\_\_\_

Applications for renewal must be received no later than April 30<sup>th</sup> for approval for the following fiscal year. Any applications for course renewal that are received after April 30<sup>th</sup> will be required to meet the criteria for original approval as outlined in 21 NCAC 04B .0802. Reports referenced in 21 NCAC 04B .0809 are required to be submitted to the North Carolina Auctioneer Licensing Board within 30 calendar days upon completion of the course. Sponsors are required to provide each licensee who completes the course, a course completion certificate within 30 calendar days following completion of the course.

**Please Note Approval Restrictions & Deadlines** 

## NORTH CAROLINA AUCTIONEER LICENSING BOARD

## **Instructor Application Form**

NCAC 04B .0804(a) and (b) requires that an entity seeking approval as a course sponsor of continuing education course must also have the course and the instructor approved. Each instructor must be qualified under one or more qualifications outlined in Section 04B .0804(d) and in addition must exhibit truth, honesty and integrity. The instructor involved in the execution of the course must be listed below and must indicate what qualification(s) he or she possess to be approved as an instructor. Each instructor must attach proof of qualification(s) with this application including a biography and/or resume and education background information and/or experience.

Name:				
Trume.		Print Full Name		
Physical				
Address:	Street	City	State	Zip
Mailing Address:				
(if different)	Street	City	State	Zip
Telephone Nu	umber:	Alternate Tele	phone Number:	
	(Include are	a code)	(Inclu	de area code)
Email:				
Signature: _	apply:			
istrat	ion or;	aureate or higher degree with a	J. C.	
	st 10 years and 3	) hours of auction education (		
		NC real estate broker license, g real estate prelicensing and c		
\ /	ession of a licens lous ten years or;	e to practice law in NC and th	ree years experience in la	w practice within the
(e) Posse	ession of qualifica	tions that would be determine in the above (a) through (d).	d by the Board to be equiv	valent to one or more

Duplicate if needed

**Instructor Information** 

Form ICES Revised 3-22