



Arizona Department of Real Estate (ADRE)

Education Division

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REAL ESTATE SCHOOL CERTIFICATION APPROVAL APPLICATION (ED-100)

Form ED-100 is used to request ADRE approval operate a real estate school that offers ADRE approved real estate pre-licensing courses or continuing education (CE) courses for license renewal. Supporting documentation is described on page 2 of this application. Do not submit applications requesting course and instructor approval before the ADRE has issued a Certificate of Approval to Operate a Real Estate School.

This application is for a (check all that apply):

- Checkboxes for: Certificate of Approval for a New School, Renewed Certificate of Approval, Address Change, Telephone/ Facsimile/Email Change, Name Change, Campus Change

SCHOOL INFORMATION

Form fields for School's Legal Name, DBA Name, Mailing Address, Website, Email, Phone No., and Primary Administrator's Contact Information.

OWNERSHIP and PURPOSE

- Owner is a: Sole Proprietorship, Corporation, Limited Liability Company, Partnership, Non-profit Corporation, Membership only (non-profit trade association)

Legal Name of School Owner(s): List the name, address, telephone number and percentage of ownership of each person, entity or beneficiary owning 10% or more financial or beneficial interest in the School ("Owner").

Use a separate sheet if necessary.

Table with 4 columns: NAME, ADDRESS (include City, State, ZIP), TELEPHONE, % OWNERSHIP

The primary PURPOSE of this business is: Real Estate Education; Other (specify):

ADMINISTRATORS and AUTHORIZED PERSONS

List the name of each individual who is authorized to sign Applications for Course Approval (Form ED-102) and Instructor's Statement of Qualifications (ED-101) on behalf of the School. NOTE: A person with this authority is deemed to exercise control over the school and requires ADRE approval as an "Administrator," on the ADRE approved form and a valid Fingerprint Clearance Card issued by the Arizona Department of Public Safety.

Form fields for Primary Administrator and Additional Administrator(s).

List the name of each individual approved Administrator(s) who is/are authorized to sign continuing education and/or prelicensure education course certificates.

REQUIRED DOCUMENTS

1. Submit to the ADRE a School Owner or Administrator Statement of Qualifications (Form ED-106) each Owner listed above and each current and prospective Administrator. Each Owner and Administrator must also submit a completed Disciplinary Actions Disclosure (Form LI-214/244) and, if not already on file with the ADRE, an Arizona Department of Public Safety issued fingerprint clearance card. A change in any Owner's or Administrator's qualifications must be submitted to the ADRE in writing within ten (10) days. A.A.C. R4-28-301 and R4-28-404.
2. An Owner or Administrator whose prior approval by the ADRE has not expired **and** prior Statement of Qualifications is still on file with the ADRE, may submit an Owner/Administrator Update form, ED-108, in lieu of the Owner/Administrator Statement of Qualifications (Form ED-106).
3. If the Owner is a corporation (CO) or limited liability company (LLC), submit all of the following:
 - 3.1. A filed and stamped copy of the Articles of Incorporation (CO) or Articles of Organization (LLC), as amended;
 - 3.2. A current Certificate of Good Standing from the Arizona Corporation Commission (ACC);
 - 3.3. A copy of the corporate resolution (if a CO) or company resolution (if a LLC) naming the individual(s) authorized to execute this form and all other forms on behalf of the School; and
 - 3.4. A copy of the latest annual report on file with the Arizona Corporation Commission (or its equivalent if the CO or LLC is domiciled outside the state of Arizona ("Foreign" CO or LLC);
 - 3.5. If a Foreign CO or LLC, a field and stamped copy of the Application for Registration, showing authority to do business in Arizona.
4. If the Owner is a partnership, submit a copy of the partnership agreement naming the individual(s) authorized to act for the School.

ASSESSING PERFORMANCE

Describe the procedures established at the School to measure course quality and student achievement of objectives. Attach additional pages as needed.

SCHOOL FACILITY AND RECORDS

Does the school have a facility, either owned or leased, at which you will regularly present classes? Yes No
If so, provide the information requested below.

Note: Classes must be held in facilities that meet federal, state & local laws and rules.

Does the school have more than one facility? Yes No. If so, please attach a separate sheet and provide the information requested below *for each campus location*.

1. Physical Address: _____
2. Number of Classrooms: _____
3. Total Size (Sq. Ft): _____
4. Does the facility meet federal, state and local laws and rules for:
Fire/Safety? Yes No **Occupancy Permits?** Yes No **Handicap Accessible?** Yes No **Zoning?** Yes No
5. Student registration and attendance/completion records will be kept: ___ At the School's Physical Address (Question 1 in this block) OR ___ Other (Specify): _____

REFUND POLICY

Please state this school’s refund policy. It must also be included in each enrollment application. (A.A.C. R4-28-404)

ATTESTATION

By my signature below, I hereby affirm that:

- I have reviewed the statutory and rule requirements for a Real Estate School set forth in A.R.S. Title 32, Chapter 20, and Arizona Administrative Code Title 4, Chapter 20 (including, without limitation, A.R.S. §§ 32-2135, 32-2153, A.A.C. R4-28-301 and R4-28-401 through R4-28-405, and R4-28-502 D).
- I have identified all persons (including entities) who own 10% or more financial or beneficial interest in the School or who will exercise control over the School and have submitted the applicable forms, Fingerprint Clearance Card(s) issued by the Arizona Department of Public Safety for the School Administrator(s) named.
- In the event of a change in Owner(s) or person(s) exercising control over the School, I will provide timely written notice to the ADRE as required under A.A.C. R4-28-404 and/or R4-28-301, with a Fingerprint Clearance Card as requested.
- I will notify the ADRE in writing of any change in my qualifications as required under A.A.C. R4-28-404 and/or R4-28-301.
- I have stated the location of registration and attendance/certification records and will notify the ADRE within ten (10) days if the location is changed.
- I will ensure that approved courses are presented only at facilities that meet federal, state and local laws and rules including, but not limited to, the Americans with Disabilities Act, fire and building safety codes.
- I acknowledge that issuance of any false certification for real estate course completion will be cause for suspension or withdrawal (revocation) of school certification and may affect other licenses issued to me or to companies I own or control.
- I will ensure that proper notice is given to the ADRE before presenting an approved course and will obtain course approval from the ADRE before this School presents any course for real estate credit. I will submit to the ADRE an Application for Course Approval no less than 30 days before the scheduled date of course for which I do not have a current Certificate of Course Approval and for a course that has been substantially revised after approval was issued. I will provide no less than 14 days advance notice before presenting a course for which I have a current Certificate of Course Approval and which has not substantially changed. I will ensure that instructors who teach courses at this School are qualified and are ADRE approved to teach the course.
- I acknowledge that the Commissioner may investigate the actions of the School and any school owner, administrator, director and instructor acting in behalf of the School, and may at any reasonable time examine the books and records of the School used in connection with offering courses for real estate credit. I will allow for and accommodate the ADRE’s representative to audit or monitor any ADRE approved real estate course or course for which approval is pending.
- I hereby affirm, individually and for and on behalf of the above referenced entity, if applicable, that all of the information given in this application is true and correct to the best of my knowledge and belief. I understand that in the event there has been any misrepresentation or willful omission in this application or in any attachments hereto, any approval that may have been granted is subject to suspension or withdrawal (revocation) at any time.
- I authorize the ADRE to contact any and all persons who it deems necessary to confirm any information contained in this application and do further authorize any person contacted to release such information.

Printed Name: _____ Signature: _____

Position/Title: _____ Date: _____