

New York State
Department of State
Division of Licensing Services
Bureau of Educational Standards
P.O. Box 22001
Albany, NY 12201-2001
(518) 486-3803
https://dos.ny.gov

Technical Real Estate Instructor Application

PLEASE READ CAREFULLY, AS INCOMPLETE APPLICATIONS WILL BE RETURNED.

- » A one time \$25 non-refundable registration fee must accompany this original, signed application (photocopies are not acceptable). Fees may be paid by check or money order (made payable to the Department of State) or by MasterCard or Visa, using a credit card authorization form. Do not send cash.
- » Attach a resume which certifies at least three years of experience in the subject matter presented in the course.
- » An approved sponsor which engages program instructors to present a course or part of a course determined as real estate related technical subject(s), must make application to the Department certifying the instructor's claimed expertise. In addition, we will consider a request for technical instructor approval based on technical expertise for the Environmental Issues, Construction I and II and Valuation sections of the qualifying curriculum. Approval is granted to individuals based on their qualifications.
- » CHILD SUPPORT STATEMENT. A Child Support Statement is mandatory in New York State (General Obligations Law) regardless of whether or not you have children.

Any person who is four months or more in arrears in child support may be subject to having his or her business, professional and driver's licenses suspended. The intentional submission of a false written statement for the purpose of frustrating or defeating the lawful enforcement of support obligations is punishable pursuant to Section 175.35 of the Penal Law. It is a class E felony to offer a false instrument for filing with a state or local government with intent to defraud.

EASE PRINT OR TYPE. EDUCATIONAL ORGANIZA	ATION DATA		
SCHOOL NAME			
ADDRESS (NUMBER AND STREET; ROOM/	SUITE DESIGNATION)		
CITY		STATE	ZIP+4
E-MAIL ADDRESS (IF ANY)			
NAME OF EDUCATION COORDINATOR		BUSINESS TELEPHONE NUMBER	E-MAIL ADDRESS (IF ANY)
NAME OF COURSE		,	
SUBJECT MATTER BEING PRESENTED			
COURSE CODE NUMBER		HOURS OF INSTRUCTION	
C: M:	S: B:		
INSTRUCTOR DATA INSTRUCTOR'S NAME HOME ADDRESS (NUMBER AND STREET; /	APT. NUMBER)		
CITY		STATE	ZIP+4
CURRENT OCCUPATION		BUSINESS TELEPHONE NUMBER	HOME TELEPHONE NUMBER
		()	()
BUSINESS ADDRESS (NUMBER AND STRE	ET; ROOM/SUITE DESIGNATION)		
CITY		STATE	ZIP+4
Have you ever been convicted registration denied, suspended			license, certification, commission or
Yes* N	No If Yes*, attach a	statement of complete details.	
ucation Coordinator Signature		_Date	
			_
R OFFICE EFFECTIVE DATE: _ E ONLY	/ / FEE RECEIVE	D: \$ TO REVENUE:	/ / RECEIPT #:

A fee of \$20 will be charged for any check returned by a bank for insufficient funds.

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Child Support Statement - By signing this application, I certify that as of the date of this application, I am not under an obligation to pay child support **OR** if I am under an obligation to pay child support, I am not four or more months in arrears in the payment of child support, or I am making payments by income execution or by court agreed payment or repayment plan or by plan agreement or by plan agreed to by the parties or my child support obligation is the subject of a pending court proceeding, or I am receiving public assistance or supplemental security income.

Applicant Affirmation - I affirm under the penalties of perjury, that the statements made in my application, including statements made in any accompanying papers, are true and correct.

In addition, I affirm under the penalties of perjury that I will meet the obligations of all applicable statutory and regulatory requirements pertaining to the instruction of the established curriculum.

Applicant's Signature	
V	
X	Date

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