



**REAL ESTATE CONTINUING EDUCATION (CE)
COURSE SPONSOR APPLICATION**
NORTH DAKOTA REAL ESTATE COMMISSION
SFN 12190 (06/08/2023)

1120 College Dr Ste 204
Bismarck ND 58501
Phone: (701) 328-9749
Email: ndrec@nd.gov
Website: realestatend.org

Continuing Education (CE) Course Sponsor Application Fee - \$100 non-refundable

Pay online at: <https://www.realestatend.org/pay-bill> (*Reference: CE Course*). Only online payments are accepted.

Please submit this completed application to the NDREC at least 30 days before the course is offered.
See NDAC 70-02-04 for approved course content.

THESE ITEMS MUST BE ENCLOSED WITH THIS APPLICATION:

- Course outline by topic with time spent on each topic indicated in segments no longer than 30-minutes
- Course objective
- Evaluation form
- Copy or sample of advertising used to promote course
- The course fee
- Copy of attendance verification form
- Application for each instructor
- Copy of all materials to be distributed to the participants
- Sample CE course certificate to be given to students upon completion of course
- Online on-demand Only: Copy of ARELLO Certification

For Official Use Only

Receipt Number	Course Expires	Course Number	Course CE Hours
Course Title		Total Hours of Course	Requested CE Hours of Course
If applicable: This course replaces a previously approved course that has an expiring certification. Current course number: _____ Current course name: _____			
Course Format <input type="checkbox"/> Online on-demand (Asynchronous – can be taken any time) <i>*Attach ARELLO certification for this online-only course.</i> Date ARELLO Certificate Expires: ____ / ____ / ____			
<input type="checkbox"/> Virtual live only (Synchronous – can be taken only at an appointed time) Provide time and date for each time course is offered:			
<input type="checkbox"/> In-classroom course only Provide time, date and place for each time course is offered:			
<input type="checkbox"/> Other, such as a hybrid (for example: offering a course both in-classroom and virtual live) Explain:			
Course Sponsor Organization Name			Is this course Mandatory <input type="checkbox"/> Yes <input type="checkbox"/> No
Website to register for the course		Email address or phone number to register for the course, if applicable	
Course Coordinator Name (First, Last)			Telephone Number
Course Coordinator Email Address			Date
Course Sponsor Organization Street Address	City	State	ZIP Code
Mailing Address, if different than above	City	State	ZIP Code

Course Instructor(s) Name(s) – *Attach applications for each instructor, even if the application has been submitted for a different course.*

Fee Schedule/Refund Policy – Provide a statement outlining fees charged for the course and how refunds are to be made.

Attendance Monitoring Policy – Explain how you intend to monitor attendance and provide a copy of the attendance verification form.

Method of Record Maintenance – Explain your procedure for maintaining all continuing education records for a minimum of 3 years