Arkansas Home Inspector Registration Board

PO Box 251911
Little Rock, AR 72225
(501) 683-3710 FAX: (501) 244-2333
EMAIL: info@ahib.org WEBSITE: www.ahib.org
Send Bulk Mail To:
121 Ridgeway Dr.
Little Rock, AR 72205

Application for Renewal of an Approved Continuing Education Offering

Complete all items and mail to the address above with the initial qualifying fee of $15.00. (If an item does not apply, enter "N/A".) See Section 800 of the *Rules and Procedures of the Arkansas Home Inspector Registration Board* (On the Internet at: http://www.ahib.org/documents/Rules.pdf)

Course Provider or Sponsor: _____:

_____h the $15.00 change

fee.□□□□□□□□□□□□□□

Address _____ City _____ State ____ Zip Code _____

Telephone (____)_____ Email address _____ Internet site URL: _____ _____

Point of Contact _____ Telephone _____ Email _____

Course Title: _____Previous Approval number: _____

Number of CEC hours _____ Proposed presentation site: _____

Dates training will be offered: _____

Total Student fee for this offering $_____ Does this fee include items other than instruction? ____ Handouts ____Books

Video tapes ___ Audio tapes or CDs ___Tools. Attach a complete description of these items and/or include samples.

Topics to be included in the course offering (Include Instructor lecture outlines for each instructor and topic. Continue on a separate sheet if needed.)

Class Hours	Topic	Instructor and Remarks

Attach:
1. Resumes for each instructor which provide teaching experience and the source of his/her expertise (quantify where possible. e.g.: 5,000 home inspections during a 20 year practice, masters degree in building science, etc.) and his experience as an instructor.
2. For offerings of 7 or more CEC hours, submit a brochure which fully describes the offering.
3. An advertising plan and copies of all advertising materials to be used.
4. A sample, course completion certificate or other document that confirms the student's successful completion of training.

Answer these questions on a separate sheet of paper:
1. What is your criterion for a student's successful completion of this offering? If partial credit is offered, what criterion are applied?
2. What are the instructional goals of this offering?
3. How is this offering relevant to an Arkansas home inspector?
4. What is your refund of fee policy?

Other requirements:

1. For-profit providers must furnish evidence that they are a fiscally responsible, legitimate organization.
2. Student attendance will be verified at intervals of no greater than 2 hours.
3. Detailed records of attendance and course completion must be maintained by the provider for 2 years and copies provided to the Board upon request.

Printed name of principal officer of Provider Firm/Organization: _____

_____ Signature: _____

Title: _____ Phone number: _____ Email address: _____

Date Signed: _____

This section for Board use only:

Approved: ____ Disapproved: ____ By: _____ Date: _____

Approval Number: _____ (**Note: Approval expires two years after the date of approval.)**

Comments: