



Montana Board of Realty Regulation

301 S. Park Ave., 4th Floor

PO Box 200513

Helena, MT 59620-0513

PHONE: 406-841-2204 ~ FAX: 406-841-2323

E-MAIL: dlibsdrre@mt.gov ~ WEBSITE: www.realestate.mt.gov

TO: Real Estate Continuing Education Provider Applicants
FROM: Board of Realty Regulation Education Committee
RE: Continuing Education Request for Individual Continuing Education Credit

The following is a checklist of items that you must provide to the Board of Realty Regulation for each individual continuing education credit application. Incomplete applications will not be reviewed.

1. Each **complete individual continuing education credit application** must include a timed outline, brochure, or other documents thoroughly describing course content and time spent on each topic.
2. Background information on the instructor(s).
3. If offered out of state, proof that the course is approved by that state's licensing board.
4. If offered online, proof that the course is ARELLO approved (www.arello.net).
5. If you have already taken the course, a course completion certificate signed by the course provider.

Send a complete application packet and all fees to Education Director, Board of Realty Regulation, PO Box 200513, Helena, MT 59620-0513. **DO NOT SEND CASH.** Make check or money orders payable to the Board of Realty Regulation. You may also pay with a credit card or e-check by completing the attached authorization form.



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REQUEST FOR INDIVIDUAL CONTINUING EDUCATION CREDIT

Fill out form below, sign and submit it along with the required materials and a \$45.00 processing fee if received within 30 days after the course completion date. If the Request for Individual CE Credit is received more than 30 days after the course completion date, an additional \$100.00 processing fee must also be included.

*Make checks payable to: Montana Board of Realty Regulation, PO Box 200513, Helena, MT 59620 or use attached payment form.

LICENSEE INFORMATION:

Licensee Name: _____ License# _____

E-mail Address: _____

COURSE INFORMATION:

Course Title: _____

Location (City/State): _____ Course Date: _____

Instructor(s): _____

Total Continuing Education Hours Requested: _____

Course Provider: _____

Provider Address: _____ Phone# _____

AFFIDAVIT OF UNDERSTANDING

The applicant verifies that s/he has read and understands the following requirements:

- Course must be taken within the current Montana licensing year (November 1- October 31).
- A separate application must be submitted for each course.
- The education must meet one of the currently approved Montana topics for continuing education (www.realestate.mt.gov: CE: Approved Topics and Education Requirements).
- Education specific to other states (i.e. North Dakota agency, Wyoming state law update etc.) will not be approved for Montana continuing education.

Applicant's signature: _____ DATE: _____