##

## Must be Completed electronically – click on the gray box to enter information

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| **NEW AGENT PERMIT APPLICATION** |
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| Proposed Start Date: MM/DD/YYYY  |
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| Agent to represent the following school location(s): (If more space is needed, attach a separate sheet.) |
| 1. City, State  | 2. City, State  | 3. City, State  |
|  |
| Agent Name: First:       | Last:       | MI:       |
| Home Address: Street, City, State, Zip |
| Date of Birth: MM/DD/YYY | Place of Birth: City, State | Home Phone:        |
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| **Employment History: Last** **five (5) years**, starting with the most recent: (If more space is needed, attach a separate sheet.) |
|  |
| 1. Employer:       | Job Title:       |
| Address: Street, City, State, Zip | From: MM/YYYY | To: MM/YYYY |
| Supervisor’s Name:       | Phone Number:       |
|  |
| 2. Employer:       | Job Title:       |
| Address: Street, City, State, Zip | From: MM/YYYY | To: MM/YYYY |
| Supervisor’s Name:       | Phone Number:       |
|  |
| 3. Employer:       | Job Title:       |
| Address: Street, City, State, Zip | From: MM/YYYY | To: MM/YYYY |
| Supervisor’s Name:       | Phone Number:       |
|  |  |
| 4. Employer:       | Job Title:       |
| Address: Street, City, State, Zip | From: MM/YYYY | To: MM/YYYY |
| Supervisor’s Name:       | Phone Number:       |
|  |  |  |
| Have you ever been licensed as a private school agent in any state, including Colorado? | Yes [ ]  | No [ ]  |
| If yes, provide name of school(s) and state(s) where located: (If more space is needed, attach a separate sheet) |
| 1. Name of School | State |
|  |
| Have you ever been a private occupational school owner before?  | Yes [ ]  | No [ ]  |
| If yes, provide name of school(s) and state(s) where located: (If more space is needed, attach a separate sheet) |
| 1. Name of School | State |

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| **Required Disclosures:** If any question below is answered “yes”, attach a written explanation. If this information has not been submitted to the Division with a previous application, include official court documentation which outlines the date and circumstances surrounding the case including, if applicable, charges and disposition of the court case which demonstrates completion of any probation or court ordered terms. (**Please note:** failure to accurately report criminal history may be grounds for immediate board action including but not limited to revocation of agent permits or certificate to operate as a private occupational school.) |
|  |
| **Have you ever:**  |
| 1. Been convicted of or pled to a felony or are felony charges pending?
 | Yes [ ]  | No [ ]  |
| 1. Been convicted of or pled to a misdemeanor other than a minor traffic violation or are misdemeanor charges pending?
 | Yes [ ]  | No [ ]  |
| 1. Been dismissed or allowed to resign from any position for immoral or unprofessional conduct?
 | Yes [ ]  | No [ ]  |
| 1. Been denied, revoked, relinquished or otherwise prevented from obtaining a private occupational school license in Colorado or any other state?
 | Yes [ ]  | No [ ]  |
| 1. Been refused bonding by any surety company?
 | Yes [ ]  | No [ ]  |
|  |
| **PLEASE MAKE SURE TO COMPLETE AND SIGN AFFIDAVIT BELOW** |
| **AFFIDAVIT OF APPLICANT** |
| In compliance with §23-64-117, C.R.S., I, \_\_\_Enter Name of Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly sworn, hereby make application for a permit authorizing me to engage in the business of selling Private Occupational Education Services for the herein named school to the public. **I** **certify that I have received a copy of the Private Occupational Education Act of 1981 and the Rules and Regulations promulgated pursuant thereto, and have read the Law and the Rules and Regulations, and further state that the above notice has been read,** and that each of the statements in this application and all items attached to this application are true and correct in content to the best of my knowledge and belief.  Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |