



REAL ESTATE CONTINUING EDUCATION SPONSOR REQUEST FOR APPROVAL OF SIGNIFICANT CHANGE(S)

State Form 50664 (R5 / 11-25)

**INDIANA REAL ESTATE COMMISSION
PROFESSIONAL LICENSING AGENCY**
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 232-2960
E-mail: pla5@pla.in.gov

INSTRUCTIONS: 1. Complete this form in its entirety. To submit by mail, send this form to the office address shown above.

Name of sponsor	Continuing Education sponsor number	Date (month, day, year)
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NAME OF NEW DIRECTOR: (Include verification of degree (transcript) if applicable, and resume indicating qualifications.)

INSTRUCTOR(S): (Attach an instructor application for all instructors not previously approved. Do not indicate instructors that have been previously approved for you.)

COURSE TITLE(S)	INSTRUCTOR NAME(S)	INSTRUCTOR PERMIT NUMBER

NEW OR CHANGING COURSE(S): (Include detailed outline for each course. Indicate number of hours for each course listed and indicate if you are asking for Broker only; Managing Broker; Managing Broker and Broker and/or Instructor.)

COURSE TITLE(S)	ASKING FOR APPROVAL FOR (MANAGING BROKER, MANAGING BROKER AND BROKER, BROKER ONLY, AND/OR INSTRUCTOR)	
	INDICATE BELOW	COURSE HOURS