


# FBPE

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FLORIDA BOARD OF  
PROFESSIONAL ENGINEERS

2400 Mahan Drive  
Tallahassee, Florida 32308

## **APPLICATION FOR APPROVAL OF LAWS AND RULES CONTINUING EDUCATION COURSE**

		<b>APPLICATION FOR APPROVAL OF LAWS AND RULES CONTINUING EDUCATION COURSE</b>		Mail to: FBPE 2400 Mahan Dr. Tallahassee, FL 32308	
<b>COMPANY NAME</b>					
<b>MAILING ADDRESS</b>		Number and Street:		Apt/Lot No.:	
		City:	State:	Zip Code:	County:
<b>BUSINESS TELEPHONE NUMBER:</b>		<b>POINT OF CONTACT:</b>			
<b>EMAIL ADDRESS:</b> Do you wish to receive correspondence via email? Yes No All email addresses are public records pursuant to F.S. Chapter 119.011(12).		<b>FEIN / SOCIAL SECURITY NUMBER:</b> Social Security Numbers are mandatory pursuant to Title 42 United States Code, Sections 653 and 654; and Sections 455.203(9), 455.213(1), 409.2577, and 409.2598, F.S.			
<b>PROVIDER CATEGORY</b>					
Please check the category that best describes your organization.					
<input type="checkbox"/> A commercial educator. See Rule 61G15-22.002, F.A.C. Definitions. (An individual or business organization trained in teaching and offering education courses for a profit).					
<input type="checkbox"/> A state or national professional association whose primary purpose is to promote the profession of engineering.					
<input type="checkbox"/> A Professional Engineer with a Florida license to practice engineering who is not and has never been the subject of disciplinary action.					
<input type="checkbox"/> A Professional Engineering Business holding a current Florida Engineering Business Registry.					
<input type="checkbox"/> A governmental agency impacting the practice of engineering that is NOT a State or Federal Agency exempt under 61G15-22.011(9), F.A.C.					
<input type="checkbox"/> Other					
<input type="checkbox"/> Other					

**INSTRUCTOR INFORMATION**

<b>Last Name</b>	<b>First Name</b>	<b>Middle</b>
<b>License Type:(check one)</b>	<input type="checkbox"/> Professional Engineer <input type="checkbox"/> Attorney	<b>License Number:</b>
<b>Last Name</b>	<b>First Name</b>	<b>Middle</b>
<b>License Type:(check one)</b>	<input type="checkbox"/> Professional Engineer <input type="checkbox"/> Attorney	<b>License Number:</b>
<b>Last Name</b>	<b>First Name</b>	<b>Middle</b>
<b>License Type:(check one)</b>	<input type="checkbox"/> Professional Engineer <input type="checkbox"/> Attorney	<b>License Number:</b>

**COURSE INFORMATION**

Submit a copy of your course materials and indicate within your course content where you address the following:

**Rules adopted, amended, or repealed during the immediate preceding biennium**

Attach supplement if needed.

**Changes to Chapters 455 and 471, F.S., from legislative action during the preceding biennium**

Attach supplement if needed.

**Describe application of the provisions of Chapter 471, F.S., to individual disciplinary cases and unlicensed practice cases during the immediately preceding biennium.**

Attach supplement if needed.

<b>List of resources used to develop the course content</b>
Attach supplement if needed.

<b>COURSE OFFERING INFORMATION</b>
Is this a new course? <input type="checkbox"/> Yes <input type="checkbox"/> No
If this is not a new course, has the course changed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Title of Course, Workshop or Seminar:
Number of Classroom Hours in Continuing Education Hours (CEHs):
<u><b>Method of Presentation</b></u>

**REMINDERS**

\* ATTACH A COPY OF THE INSTRUCTOR(S) RESUMÉ (CURRICULUM VITAE) THAT DEMONSTRATES KNOWLEDGE OF CHAPTER 471, F.S. AND CHAPTER 61G15, F.A.C.

\* ATTACH A COPY OF THE CERTIFICATE OF COMPLETION.

\* ATTACH A COPY OF THE DOCUMENT USED TO EVIDENCE ABILITY TO MONITOR STUDENT ENROLLMENT AND PARTICIPATION UPON COMPLETION OF THE COURSE.

\* DESCRIBE HOW YOU WILL ASSURE QUALIFIED INSTRUCTORS WILL BE AVAILABLE TO ANSWER QUESTIONS AND PROVIDE STUDENTS WITH NECESSARY SUPPORT DURING THE DURATION OF THE COURSE, PURSUANT TO THE REQUIREMENTS IN RULE 61G15-22.0105.

\* ATTACH A COPY OF THE STATEMENT USED BY THE STUDENTS TO EVIDENCE COMPLETION OF EACH MODULE/SESSION OF INSTRUCTION.

**ATTESTATION**

I have carefully read the questions in the foregoing application and have answered them completely, without reservations of any kind. I hereby agree to abide by the Florida Board of Professional Engineers Laws and Rules regarding Continuing Education provider status in Chapter 61G15-22.

*Applicant*

Sign Here  \_\_\_\_\_ Date \_\_\_\_\_