

**Instructions for Making Application for Registration as a
Sponsor of Continuing Education
Under the Provisions of the
Illinois Barber, Cosmetology, Esthetics and Nail Technology Act**

Sponsors may include accredited universities and colleges, industry or trade associations, corporate salons, franchise salons, independent salons, vocational and technical schools, cosmetology schools, and other entities approved by the Department of Financial and Professional Regulation, Division of Professional Regulation. A registered sponsor shall provide CE courses that are organized programs of formal learning that contribute directly to a licensee's knowledge and ability to perform his/her duties as a licensee.

1. Complete the Application for Registration as a Sponsor of Continuing Education in its entirety (front and back).
2. Submit a sample evaluation form. The form must be completed by each participant to evaluate the instructor and the CE program. The evaluation form must indicate the instructor's name, CE program name and the date of CE program.
3. Submit a sample detailed outline of one 3-hour program for each licensure category for which you seek approval. All programs must be in subject areas in accordance with Section 1175.1200 of the Rules.

For each program, you must provide the instructor's qualifications and specify the program objectives and program content as well as any prerequisites or requirements. You must also specify the licensure category for which the CE applies and the number of CE hours that will be earned. This information must be provided in all promotional materials.

4. Submit a sample copy of the Certificate of Attendance that will be furnished to each participant who completes the CE program.

The Certificate of Attendance must include:

- Sponsor's name, headquarters address and Illinois CE Sponsor registration number;
- Name, and Illinois license number of the participant;
- Title of the CE program;
- Date the program began and ended;
- Number of CE hours received by the participant; and,
- Licensure category for which the CE applies.

5. Sponsors who intend to provide individual study courses (correspondence, audio, video or internet courses), must also submit the following for EACH course:
 - a) Submit all materials used for the individual study course to the Division for review.
 - b) The Division will not consider use of copyrighted materials for continuing education without an appropriate release from the copyright holder. You must submit a release to utilize any copyrighted materials from the copyright holder if the materials were written by someone other than the sponsor.
 - c) Submit the credentials of each person who participated in writing the materials. You must verify each person's education and/or experience as related to the subject area of each program.
 - d) Submit an examination for each individual study course.
 - e) Submit the method of verifying that the participant has successfully completed the individual study course.
 - f) For each individual study course, you must specify the program objectives and program content as well as any prerequisites or requirements. You must also specify the licensure category for which the CE applies and the number of CE hours that will be earned. The number of CE hours earned can be no more than the actual time it takes an average person to read all the materials and complete the examination.

Continuing education sponsors registered under the Illinois Barber, Cosmetology, Esthetics, and Nail Technology Act that hold approval to provide individual study courses may offer new individual study courses without obtaining additional approval.

6. Submit a listing of all Illinois locations owned or operated by the sponsor submitting the application.
7. Submit a non-refundable, \$500 application fee in the form of a check or money order made payable to the Illinois Department of Financial and Professional Regulation. State of Illinois agencies, colleges, and universities are exempt from payment of the application fee and renewal fees.
8. Mail the application, supporting documentation and application fee to the Illinois Department of Financial and Professional Regulation, ATTN: Division of Professional Regulation, PO Box 7007, Springfield, Illinois 62791.
9. If assistance is needed, direct your request to 217/782-8556.
10. The Barber, Cosmetology, Esthetics and Nail Technology Board meets quarterly to review all applications prior to approval by the Department. Meeting notices are posted on the IDFPD Web site at www.idfpr.com.

NOTE: If you are already registered as an Illinois continuing education sponsor and wish to obtain approval for additional licensure categories, please complete #1-6 above. **No fee is required.** Mail the application and supporting documentation to the address provided in #8 above.

The Illinois Barber, Cosmetology, Esthetics, and Nail Technology Act and Administrative Rules are available at www.idfpr.com. You may obtain a printed copy by calling 217/782-8556 or by submitting a written request to the Division.

IMPORTANT NOTICE: Completion of this form is necessary for consideration for licensure under 225 ILCS 410/1 et. seq. (Illinois Compiled Statutes). Disclosure of this information is VOLUNTARY. However, failure to comply may result in this form not being processed.

APPLICATION FOR REGISTRATION AS A SPONSOR OF CONTINUING EDUCATION UNDER THE BARBER, COSMETOLOGY, ESTHETICS AND NAIL TECHNOLOGY ACT

1. TYPE OF OWNERSHIP <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	2. PROFESSION CODE <p style="text-align: center; font-size: 1.2em;">190</p>	3. FEE <p style="text-align: center; font-size: 1.2em;">\$500</p>
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4. OFFICIAL NAME OF SPONSOR	5. FEIN NUMBER (If Sole Proprietorship, Social Security Number)
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6. ADDRESS OF SPONSOR'S HEADQUARTERS (Include Street, City, State, and ZIP Code)	7. SPONSOR'S TELEPHONE NUMBER (Include Area Code)
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8. NAME OF PERSON RESPONSIBLE FOR CONTINUING EDUCATION PROGRAMS	9. TELEPHONE NUMBER OF PERSON RESPONSIBLE
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10. LOCATION WHERE RECORDS WILL BE MAINTAINED (Include Street, City, State, and ZIP Code)	11. TELEPHONE NUMBER OF PERSON RESPONSIBLE FOR RECORD KEEPING (Include Area Code)
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12. WHAT TYPE OF ENTITY IS THE SPONSOR? (University, college, association, salon, school or other entity)

13. THIS SPONSOR WILL OFFER CONTINUING EDUCATION PROGRAMS TO THE FOLLOWING LICENSURE CATEGORIES:

<input type="checkbox"/> Cosmetologist	<input type="checkbox"/> Esthetician	<input type="checkbox"/> Nail Technician
<input type="checkbox"/> Cosmetology Teacher	<input type="checkbox"/> Esthetics Teacher	<input type="checkbox"/> Nail Technology Teacher

14. Does sponsor intend to offer individual study courses? (Correspondence, audio, video or Internet courses) Yes No

15. IF SPONSOR OWNS AND OPERATES MULTIPLE LOCATIONS IN ILLINOIS, ATTACH SEPARATE SHEET LISTING ALL LOCATIONS, INCLUDING THE ADDRESSES (Street, City, State, ZIP Code).

16. THE FOLLOWING MUST BE INCLUDED WITH THIS APPLICATION:

- a sample evaluation form of the instructor and the program;
- a sample detailed outline of one 3-hour program for each licensure category;
- a sample certificate of attendance;
- all documentation for **EACH** individual study course;
- listing of all locations owned or operated by the sponsor (if applicable); and
- fee in the amount of \$500 in the form of a check or money order made payable to the Illinois Department of Financial and Professional Regulation (if applicable).

Type or Print Name of Person Responsible for CE Programs	Title
Signature of Person Responsible for CE Programs	Date

I UNDERSTAND THAT FEES ARE NOT REFUNDABLE. My signature above authorizes the Department of Financial and Professional Regulation to reduce the amount of this check if the amount submitted is not correct. I understand this will be done only if the amount submitted is greater than the required fee hereunder, but in no event shall such reduction be made in an amount greater than \$50.

AFFIDAVIT

I hereby certify that I am the individual responsible for the continuing education programs offered by the sponsor named on the reverse side of this form and that the sponsor will at all times comply with the following requirements:

1. Programs will be open to all persons who hold a license and for whom the program contributes directly to their knowledge and abilities to perform their duties as a licensee, and to any licensee under the Act who is inactive, on probation, or in need of continuing education (CE) hours. All advertisements of the program and all program enrollment forms will clearly state this fact.
2. Anytime the sponsor subcontracts with a presenter, all advertisements, promotional materials and the Certificate of Attendance will bear the name, address and registration number of the sponsor. The name of the subcontractor may appear as the "Presenter" but no document shall imply that the subcontractor is registered as a CE sponsor.
3. As a registered CE sponsor, we will retain responsibility for maintenance of all records for the programs presented by subcontractors. We will be responsible for the subcontractor's maintenance and adherence to the standards applicable to sponsors under the Illinois Barber, Cosmetology, Esthetics and Nail Technology Act and Administrative Rules.
4. All presenters at a CE program will be qualified by education, work experience or licensure to make their presentations.
5. The course objectives, content, prerequisites, requirements, and the licensure category (or categories) for which CE applies and the number of CE hours to be earned will be specified in all promotional materials.
6. No product sales shall be permitted during a CE program. After the CE program is over and the Certificates of Attendance are distributed to the participants, product sales shall be permitted.
7. A Certificate of Attendance which reflects accurate information will be provided to each program's participant. Records will be maintained for five (5) years and in such form and fashion as will allow this sponsor to provide duplicate records of attendance to participants and/or the Division.
8. I understand that the Division may require additional materials to be submitted as part of the ongoing audit of registered CE sponsors.
9. Failure to comply with the Act and rules may result in disapproval of this sponsor by the Division.
10. The Division will give no credit for courses given subsequent to the date of the Division's withdrawal of the sponsor's approval.

Print Name of Person Responsible for CE Programs

Signature of Person Responsible for CE Programs

NAME OF CE SPONSOR:

Profession: