PART A: Continuing Education:

____ I have fully complied with the Continuing Education requirement for the renewal of my license. This includes the mandatory 1 hour Sexual Harassment Prevention Training.

____ I wish to renew my license in an INACTIVE status.

- Licensee must have completed all CE requirements including Sexual Harassment Prevention Training
- Licensee may NOT practice while in an INACTIVE status. Practicing on an inactive license is possible grounds for disciplinary action.

PART B: Child Support Statement:

Are you more than 30 days delinquent in complying with a child support order? (Note: If you are not subject to a child support order, answer "No.")

____ No       ____ Yes

DAYTIME PHONE NUMBER:  (   ) ______________________

SIGNATURE: ________________________________________________

Print Name: ________________________________

My signature above authorizes the Department of Financial and Professional Regulation to reduce the amount of this check if the amount submitted is greater than the required fee above, but in no event shall such reduction be made in an amount greater than $50.

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SPONSORING BROKER CHANGE (If Applicable)

If you have changed your sponsoring broker, please complete the information to the right.

You are required to include a $25.00 fee and this section of the renewal IN ADDITION to your completed License Renewal above.

| Sponsor Name: ___________________________ | License# ___________________________ |
| Sponsor Signature: ________________________ |
| Sponsor Address: ____________________________ |
| City/State/Zip: ____________________________ |
Department of Financial and Professional Regulation
Attn: Licensing Unit
320 West Washington St, 3rd Floor
Springfield, IL 62786

Please PRINT any name/address change below. Change of name must be accompanied by documentary proof.

Name:_______________________________________________
Address:_____________________________________________
City/State/Zip:_________________________________________

CHECK/MONEY ORDER: Mail the upper portion of this renewal form along with the correct fee. Only checks and money orders, payable to the DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION, will be accepted. Only checks drawn on United States Banks within the Federal Reserve are accepted. Mailed renewals typically require four to six weeks to process. DO NOT SEND CASH! Placement of a STOP PAYMENT on a check results in a $50 fine.

PAYMENT OPTIONS (Fees are NOT Refundable)

LICENSE NO.: 473._________
Sponsor License #: ________________________________
Sponsor Name: ___________________________________

Name:_______________________________________________
Address:_____________________________________________
City:________________________________________________
State:_________________________ Zip Code:________________

City/State/Zip:_________________________________________

(check or money order)