

LICENSE NO.: 563.

PART A: Instruction/Training Statement:

____ I have instructed at least one elective CE course during the current license term OR have completed a 6-hour instructor training program approved by IDFPR during the current license term.

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

Fee Before: 6/30/2021 \$150.00 (See Payment Options Below.)

Fee After: 6/30/2021 \$200.00 (Includes Late Penalty Fee.)

PART C:

I understand that if I provide false/fraudulent information I could lose my license, be fined and/or have other penalties assessed. I also understand the FEES ARE NOT REFUNDABLE. Therefore, I declare that I have examined this form and, to the best of my knowledge, all statements are true, correct and complete.

Signature (Required): _____

Printed Name: _____

Email (Required): _____

DAYTIME PHONE NUMBER: () _____

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 above, but in no event shall such reduction be made in an amount greater than \$50.

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▲▲▲ FOLD AND DETACH ON PERFORATION ▲▲▲

Department of Financial and Professional Regulation
Division of Professional Regulation

**RENEWAL
NOTICE FOR:**

**LICENSED
REAL ESTATE CE INSTRUCTOR**

LICENSE RENEWAL INSTRUCTIONS

1. Illinois law requires you to respond to the question regarding Instruction/Training in Part A.
2. Illinois law requires you to respond to the Child Support question in Part B. Licensees required to pay child support must certify on this renewal form to not being more than 30 days delinquent in complying with a child support order. If you are not subject to a child support order, answer "No".
3. Make any name or address changes on the reverse side of this form. Name changes must be accompanied by copies of one of the following: marriage certificate, divorce decree, court order, etc.
4. You must sign the application in the space provided and indicate your Email Address in Part C.

Failure to follow instructions will result in your license renewal being delayed. Practice after the expiration of your license shall constitute unlicensed practice which could result in civil/criminal penalties and discipline of your license.

PAYMENT OPTIONS (Fees are NOT Refundable)

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.

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Please PRINT any name/address change that differs from that shown.
Change of name must be accompanied by documentary proof.

Name: _____

Address
Lines: _____

City: _____

State: _____ Zip Code: _____

Email: _____

Department of Financial and Professional Regulation
Division of Professional Regulation
Post Office Box 7450
Springfield, IL 62791-7450

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******* NOTICE *******

INCOMPLETE RENEWALS: An incomplete renewal will be returned to you for proper completion. This will result in a substantial delay in renewing your license to practice. We cannot process your renewal by mail without the following information:

Your renewal must be signed.

A signed check or money order must be enclosed.

You must answer the child support question.

If you have changed your name, you must enclose proof of a name change. Proof can be any one of the following:
marriage certificate, divorce decree, court order, etc.