

North Carolina Department of Insurance

APPLICATION FOR INSTRUCTOR APPROVAL FOR BAIL BOND PRELICENSING EDUCATION (PLE) COURSES

Mail to: NC Dept. of Insurance, Bail Bond Regulatory Division, 1201 Mail Service Center, Raleigh, NC 27699-1201

Instructor qualifications: 1) Has not been disqualified in any manner under Chapter 58 of the North Carolina General Statutes and 2) Has 10 or more total years experience in the NC bail bond industry. Attach a resume providing work experience and educational background.

Instructor applicant shall submit to a personal interview by the PRPD Division. A written history of courses tought by the

Instructor applicant shall submit to a personal interview by the BBRD Division. A written history of courses taught by the applicant or other documentation is required to verify the applicant's qualifications to instruct approved courses.

1. Full Name				
2. Residence Address:				
(Street/P. O. Box)		(City)	(State)	(Zip)
Phone ()	Email			
3. Business Name:		Phone ()_		
Business Address:				
(Street/P. O. Box)		(City)	(State)	(Zip)

- 4a. Have you ever been denied a bail bond license or had any professional/occupational license suspended, revoked, or surrendered in North Carolina or elsewhere? ___Yes ___No
 - If yes, please attach a statement providing complete details, a copy of the Notice of Hearing or other document that states the charges and allegations, and a copy of the official document that demonstrates the resolution of the charges or any final judgment.
- 4b. Have you ever been convicted of a crime, had a judgment withheld or deferred, or are you currently charged with committing a crime? ___Yes ___No
 - "Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.
 - If yes, attach a statement providing complete details, a copy of the charging document and a copy of the official document that demonstrates the resolution of the charges or any final judgment.

5.	Signature of Applicant I certify that the information provided on this application and all attachments are true and correct to the best of my knowledge. I understand that any omission, inaccuracy or failure to make full disclosure constitutes grounds for denial of approval or for suspension/revocation of approval if granted.			
	Signature	Date		
Dralia	oneing Education Provider Cartification			
I, the named with a	l above meets the qualifications to teach bail bo	on provided herein is true and correct. Additionally, I certify that the instructor and prelicensing education courses and will ensure that the instructor complies lure to abide by the requirements may result in the termination of this provider's wals will be simultaneously withdrawn.		
		/		
Signat	ture/Provider Name	Date		
BBRD	D-BB-PEIA (Rev 2-19)			