



TEXAS DEPARTMENT OF LICENSING AND REGULATION

P.O. Box 12157 - Austin, Texas 78711-2157
(800) 803-9202 - (512) 463-6599 - FAX (512) 463-1512
www.tdlr.texas.gov education@tdlr.texas.gov

AUCTION SCHOOL CURRICULUM APPROVAL APPLICATION INSTRUCTIONS

PLEASE NOTE:

- The application must be completed and signed by the applicant or authorized designee.
- All information provided must be typed and printed in black ink.

1. **Course Name**– Enter the name of the course you are seeking approval for.
2. **School Name**– Enter the name of the school.
3. **Mailing Address/Contact Information** – Enter your mailing address and contact information. The address provided may be a post office box and will be used by TDLR to mail correspondence. Provide the contact person's name, telephone number, fax number and email address. The contact person and their email address will be used as a part of the key information required to transact business with TDLR. Email addresses are confidential pursuant to the Texas Public Information Act. The Department will not share it with the public.
4. **Physical Address** – Enter your physical address. The actual address where permanent records are kept.
5. **Approval Requirements** – Submit a complete copy of the 80 hour curriculum that will be taught for approval, along with the following:

A certificate of approval from the Texas Workforce Commission showing your school is an approved career or college.

OR

Documentation from the Texas Workforce Commission that your school is exempt from being registered as a career school or college, or a written explanation that you are not required to apply to the Texas Workforce Commission for an exemption.

Statement of Applicant– Print the applicant or authorized designee's name, and provide signature and date; this person is the person responsible for your program.

Submit your registration application, fee of XXXX and supporting documents to TDLR to the address above.



APPLICATION FOR:

**AUCTION SCHOOL CURRICULUM
 APPROVAL APPLICATION**

PURSUANT TO TITLE 11, OCCUPATIONS CODE, CHAPTER 1802

DO NOT WRITE IN THE FEE AREA IMMEDIATELY BELOW

FEE	RECEIPT NUMBER	EVENT CODE	FEE AMOUNT	PMT. AMOUNT	MONEY TYPE
Registration					

DO NOT WRITE ABOVE THIS LINE

THIS FORM MUST BE TYPED OR PRINTED IN BLACK INK

Course Name:

School Name:

Address and Contact Information: (USED FOR ALL CORRESPONDENCE)

Number, Street and Suite No. OR PO Box Number

City State Zip Code

Physical Address (Where Permanent Records Are Kept)

Contact Person Email Address (johndoe@aol.com for example)

() ()
 Area Code Phone Number Area Code Fax Number

Approval Requirements:

The following is required to be submitted with this approval application:

- A complete copy of the 80 hour auctioneer curriculum that will be taught, and;
 - Certificate of approval from the Texas Workforce Commission showing your school is an approved career school or college.
- OR**
- Documentation from the Texas Workforce Commission that your school is exempt from being registered as a career school or college, or a written explanation that you are not required to apply to the Texas Workforce Commission for an exemption.

STATEMENT OF APPLICANT

I certify that I will comply with all applicable provisions of the Occupations Code, Chapter 1802, Auctioneers; the administrative rules (Texas Administrative Code, Chapter 67); the law of the Texas Department of Licensing & Regulation (Texas Occupations Code, Chapter 51); and the rules of the Texas Department of Licensing & Regulation (Texas Administrative Code, Chapters 59 and 60). I understand that providing false information on this application may result in the revocation of the approval I am requesting and the imposition of administrative penalties.

Printed Name of Authorized Representative

Signature of Authorized Representative

Date