



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

COURT-ORDERED PROGRAM ENDORSEMENT APPLICATION INSTRUCTIONS

Each entity requesting to add a Court-Ordered Program endorsement to their provider license shall provide an application for approval that shall be in compliance with 16 TAC 90 and TDLR-established guidelines.

1. LEGAL NAME OF PROVIDER – Enter the legal name of the program/provider.
2. APPLICATION FEE – \$280.00 (NON-REFUNDABLE)
3. DBA NAME OF PROVIDER – Enter the DBA name of the provider if the legal name of the provider differs. This is the name that is used in advertisements.
4. PROVIDER LICENSE NUMBER – Enter the Program/Provider License Number.
5. COURT-ORDERED PROGRAM – Indicate program application type and indicate if the course will be offered in Spanish. A separate application will need to be submitted for each program endorsement. All program providers must have a designated instructor endorsed to teach the same endorsement(s) as the provider.
6. PROVIDER MAILING ADDRESS – Enter the mailing address. This address is where the Department will mail all correspondence and may be a post office box.
7. INSTRUCTOR INFORMATION – List all instructors associated to the program.
8. STATEMENT OF APPLICANT – Application must be signed by the owner, officer or other authorized representative. You must print your name, sign and date the application.

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

Texas Department of Licensing and Regulation
P.O. Box 12157
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, please visit the [Texas Department of Licensing & Regulation website](http://www.tdlr.texas.gov) or reach the [Education and Examination Division via webform](#) where you can submit your request for assistance and include attachments as needed.



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COURT-ORDERED PROGRAM ENDORSEMENT APPLICATION

1. Legal Name of Provider: _____	2. Application Fee: (Non-Refundable) \$280.00
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3. Doing Business As (DBA) Name of Provider: (If different from Legal Name) _____	4. Provider License Number: _____
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5. Court-Ordered Program: (check one program - submit a separate application for each program type)

Alcohol Education Program for Minors Drug Offender Education Program

DWI Education Program DWI Intervention Program

Indicate if the course will be offered in Spanish.

6. Provider Mailing Address:

Street Number, Street Name, Suite Number/Building Number City, State, Zip Code

7. Instructor Information:

_____	_____	_____
Instructor Name	Instructor License Number	Expiration Date
_____	_____	_____
Instructor Name	Instructor License Number	Expiration Date
_____	_____	_____
Instructor Name	Instructor License Number	Expiration Date
_____	_____	_____
Instructor Name	Instructor License Number	Expiration Date
_____	_____	_____
Instructor Name	Instructor License Number	Expiration Date
_____	_____	_____
Instructor Name	Instructor License Number	Expiration Date

8. STATEMENT OF APPLICANT

By signing this application I certify that all information submitted on this application is true and accurate. I certify that I will comply with all applicable rules of the Texas Department of Licensing & Regulation (16 Texas Administrative Code, Chapter 90). I understand that providing false information on this application and all attachments may result in the revocation of the approval I am requesting and the imposition of administrative penalties.

_____	_____
Signature of Owner, Officer, or Authorized Representative	Date Signed
_____	_____
Printed Name of Owner, Officer, or Authorized Representative	Title