

New York State Education Department **Private School Agent's Certificate Application**

Bureau of Proprietary School Supervision Licensing Unit	For Office Use Only	BPSS-18 (9/05)
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Date Received / /	Date Issued / /	Date Expired / /	Temporary Certificate Number <table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td> </tr> </table>										
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SED CODE (submitting school)											
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INSTRUCTIONS:

Application is hereby made for an agent's certificate to solicit students under the provisions of the New York State Education Law, Sections 5003 and 5004.

For a **new applicant**, the school owner or director may submit this application by choosing one of the following options:

1. Mail the application to the New York State Education Department, Bureau of Proprietary School Supervision, Room 962 EBA, Albany, NY 12234 **OR**
2. Deliver the complete application to the Bureau of Proprietary School Supervision at either: 116 West 32nd Street, 5th Floor, New York City; or Room 962 EBA, Albany between the hours of 9 a.m. and 3 p.m. Monday through Wednesday. Upon receipt of a complete *new* application, the school official will receive a temporary agent certificate, valid for 60 days.

Note: A *new applicant* is one who has never been issued a certificate, or who is requesting a certificate for a different location.

For a **renewal applicant**, the school owner or director must submit this application by mailing it to: The New York State Education Department, Bureau of Fiscal Management, P.O. Box 7346, Albany, NY 12224.

Note: A *renewal applicant* is one who has been issued a certificate for the same school and location previously and is requesting the same for another two-year period.

All applications must include the following:

- a) A non-refundable one hundred dollar check or money order payable to the New York State Education Department; and
- b) Two recent photographs which are ONE INCH by ONE INCH and a good likeness of the applicant, which will be included on the agent's certificate for identification purposes.

1. Name: (Last)	(First)	(Middle)
2. Former Name (if applicable) (Last)	(First)	(Middle)
3. Home Address		4. Telephone
		()
5. Social Security Number / /	Privacy Notification: The authority to request personal information from you, including identifying numbers such as Federal Social Security Number, and the authority to maintain such information is found in section 5 of the Tax Law. Your disclosure of this information is mandatory and will be used for administration purposes.	
If Social Security Number has not been provided, please explain:		<input type="checkbox"/> SS# applied for or pending <input type="checkbox"/> other:
6. Date of Birth (Month, Day, Year)		
7. Address of the School You Will Represent		
8. Name and Type of School You Will Represent		<input type="checkbox"/> Business or Computer Training <input type="checkbox"/> Private (Trade)
9. Have you solicited students for another school or school location in the last 4 years? If "yes," please list the names and addresses (city, state)		<input type="checkbox"/> Yes <input type="checkbox"/> No

10. Have you ever had a school agent's certificate revoked, suspended, or denied? Yes No
If "yes," please explain here or attach note if necessary:

11. References Certification

I hereby certify that the person named in this application, to the best of my knowledge and belief, is ethical and of good moral character. I further certify that I am not the applicant's employer, co-worker, or family member.

Name

Address

Signature

Telephone

Name

Address

Signature

Telephone

- | | | |
|---|------------------------------|-----------------------------|
| 12. (a) Have you ever resigned from a position rather than face disciplinary charges? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) Have you ever been discharged from employment as a result of disciplinary action? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) Have you ever been convicted of any crime (felony or misdemeanor)?
If "yes," submit official copies of court report including disposition of the case. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) Are you currently under charges for any crime (felony or misdemeanor)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (e) Have you ever had a professional credential revoked, suspended, annulled, or denied? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered "yes" to any question, explain the response on a separate sheet. A "yes" answer to any question is not an automatic bar to the issuance of a license/ permit.

13. Applicant's Certification

I hereby certify that I have read the Rules and Regulations of the Commissioner of Education, and that I will act in accordance with and abide by the provisions thereof, that my representations to prospective students shall be free from misrepresentation and fraud, and that I will provide such information as may be required by the Commissioner of Education concerning my activities as an agent within the State of New York.

If I cease to represent the above school or schools, I will return my agent's certificate immediately to the New York State Education Department, Bureau of Proprietary School Supervision.

Under penalties of perjury, I declare and affirm that the statements made in this application, including accompanying statements are true, complete and correct. I understand that any false or misleading information in, or in connection with, my application may be cause for denial or loss of licensure.

Date

Applicant's Signature

14. School Certification

I hereby certify that the foregoing statements are true to the best of my knowledge and belief; this agent is fully informed of the school's course offerings, services, charges, enrollment conditions, operating policies, and refund policies; this school assumes full responsibility for the actions, statements and conduct of this agent; and this school uses an acceptable plan for the selection, training, and supervision of agents.

Date

Signature of Director or Owner