

# NEW MEXICO REQUEST FOR PRE-LICENSING COURSE APPROVAL

*Please clearly print or type information on this form. Thank you for helping us promptly process your application.*

### ***Provider Information***

Provider Name		NM Provider No.	
Contact Person	Phone Number	Is Provider an Insurer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address		City	State    Zip Code
Fax Number	Email address of Contact Person		

### ***Course Information***

Course Title	
Date of Course Offering (if applicable)	
METHOD OF INSTRUCTION	
<b>Bail Bondsman Training</b> <input type="checkbox"/> Classroom <input type="checkbox"/> On-The-Job Training <input type="checkbox"/> Apprenticeship	<b>Solicitor Training</b> <input type="checkbox"/> Classroom <input type="checkbox"/> On-The-Job Training
Examination Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	

### ***Credit Hours Requested and Course/Hours Decision***

Course Concentration	Hours Required	Hours Approved by CE Committee
<b>Bail Bondsman Training</b>		
Classroom                      (50 minutes = one hour)	<i>10 Hours</i>	
On-The-Job Training        (60 minutes = one hour)	<i>30 Hours</i>	
<b>Solicitor Training</b>		
Classroom                      (50 minutes = one hour)	<i>10 Hours</i>	
On-the-Job Training        (60 minutes = one hour)	<i>30 Hours</i>	

### ***FOR CONTINUING EDUCATION COMMITTEE ONLY***

<i>Course Approval and Expiration Date</i>	
<i>Course Disapproved</i>	
<i>Signature of Continuing Education Member</i>	
<i>Date Course Was Reviewed</i>	