



AGREEMENT TO PROVIDE CONTINUING EDUCATION

Provider/Instructor agrees to conduct courses in accordance with the Board requirements;

Provider/Instructor agrees and understands that in order for a licensed contractor to receive the proper continuing education credit all courses must be approved by the Board prior to offering the course;

Provider/Instructor understands that credit for an approved course will not be granted to the attendee until completion of the entire course; and that credit shall not be awarded for courses attended prior to becoming a licensed contractor;

Provider/Instructor agrees to provide each attendee with a certificate of attendance to be completed by the attendee and submitted by the attendee to the LSLBC to demonstrate compliance with the continuing education requirement;

Provider/Instructor agrees to maintain and submit to the Board a list of attendees, last 4 digits of attendee's social security number, and attendee's LSLBC license number on the Board's prescribed roster;

Provider/Instructor agrees to distribute course evaluations to attendees and submit completed evaluation to the Board within fourteen (14) days of course completion;

Provider/Instructor understands and agrees that in order to advertise a course for continuing education credit the provider must state on the advertisement as follows:

“This course, (title of course), has been approved by the Louisiana State Licensing Board for Contractors for ___ hours of continuing education credit.”

Provider/Instructor agrees and understands that the Board has the authority to monitor approved courses to determine whether the provider/instructor are complying with the terms of the agreement and the rules and regulations of the Board;

Provider/Instructor agrees and understands that the Board may suspend, revoke or terminate the agreement with any approved continuing education provider/instructor, if the Board determines that either has failed to comply with the terms of this agreement or the rules and regulations of the Board.

Name of Provider/Instructor

Executive Director, LSLBC

Authorized signature

Date

Date