



Fair Housing Board
PROPRIETARY SCHOOL CERTIFICATION APPLICATION
Fee \$100.00

A check or money order payable to the TREASURER OF VIRGINIA,
 or a completed credit card insert must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

1. Business Entity/Sole Proprietor's Name _____

2. Trade, "Doing Business As" (DBA), or Fictitious Name [▲] _____

[▲] All business entities with DBA and Fictitious names must attach a copy of the certificate filed with the Clerk of the Court in the locality where business will be conducted (if required by the locality).

3. Type of business entity (select only **one**)

- Sole Proprietorship
 Limited Partnership ♦
 Limited Liability Company ♦
 Other, please specify: _____
 Association
 General Partnership
 Corporation ♦

State Corporation Commission Number: _____

♦ If your business is a **corporation, limited liability company, or limited partnership**, your business/trade name(s) must be registered with the Virginia State Corporation Commission. For additional information, contact the SCC at www.scc.virginia.gov or by phone at (804) 371-9733.

4. Select **one** of the following and provide the information below.

Business Federal Employer Identification Number (FEIN) [❖] -

Federal Employer Identification Number (12-3456789)

❖ State law requires every applicant, *who is not a sole proprietor*, to provide a federal employer identification number. *Sole proprietors must provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.*

Sole Proprietor's/Individual's Social Security Number **or** - -

Social Security or Virginia DMV Number (123-45-6789)

Virginia Department of Motor Vehicles Control Number ^{*}

* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

5. Mailing Address (PO Box accepted) _____

If a mailing address is submitted, the mailing address will be printed on the license.

City _____ State _____ Zip Code _____

6. Street Address (PO Box not accepted) Check here if Street Address is the same as the Mailing Address listed above.

PHYSICAL ADDRESS REQUIRED

City _____ State _____ Zip Code _____

7. Email Address _____

8. Contact Numbers _____

Primary Telephone Alternate Telephone Fax

Office Use Only	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			1006		0211	

9. Name & Title of School Contact Person _____

10. Type of School (select only **one**)

Privately owned school

Real Estate Professional Association

Other _____

11. Method of Instruction (select **all** that apply)

Classroom

Correspondence

On-line

Other distance learning, describe _____

12. I, the undersigned, certify that the foregoing statements and answer are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that the school has complied with all the laws of Virginia related to fair housing school certification under the provisions of Title 54.1, Chapter 23.2 of the *Code of Virginia and the Virginia Fair Housing Board Certification Regulations*.

Signature _____ Date _____

Additional Documentation Required

⇒ To ensure that the propriety school meets the financial responsibility requirement pursuant to 18 VAC 62-20-120.A of the Fair Housing Board Certification Regulations, the Board requires every proprietary school applicant to attach a CPA-certified letter attesting to the applicant's net worth or a balance sheet/financial statement certified to be accurate by the applicant.