

# Kentucky Education Completion Certification

Provider:

Type of Education:       Continuing Education                               Post-Licensing Education

Course Title:

Date of Course:

Course Number:

Location of Course:

CE Hours:

Elective \_\_\_\_ Law

PLE Hours: \_\_\_\_       Mandatory (If Mandatory, select topic below)                               Elective

Licensee Compliance

Agency

Contracts

Disclosure

Finance

Fair Housing

Advertising

Technology

RiskMngmt

Licensee Name:

License #:

Licensee's Residence Address:

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Signature of Course Provider's Representative/Instructor

**NOTE TO LICENSEE:** The provider of this continuing education course is required to submit a class attendance roster to the Commission. This certificate is for your personal records. It is proof that you attended this class and should not be discarded. If a discrepancy occurs, you may be asked to forward a copy of this certificate to the Commission for verification.