

**STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF THE OMBUDSMAN**

3300 W. Sahara Ave., Suite 325 * Las Vegas, Nevada 89102
(702) 486-4480 * Toll free: (877) 829-9907 * Fax: (702) 486-4520
E-mail: Cameducation@red.nv.gov <http://www.red.nv.gov>

Community Manager Pre-Certification Education Application for Classroom offerings

The review process for a new classroom offering starts with a completed application submitted to the Office of the Ombudsman. When the file has been screened for completeness and if the course meets the standards for pre-certification education as defined in NAC 116A.205, it will be placed on the agenda for the next meeting of the Commission on Common-Interest Communities and Condominium Hotels (“CIC commission”). Meetings are scheduled by the commissioners (www.red.nv.gov under Commission Meetings) several times per year.

Due to Nevada’s open meeting laws, education applications must be received a minimum of 45 days before the scheduled meeting to be reviewed and placed on the agenda. Since meeting dates can change and approval is not guaranteed, we strongly recommend course dates not be scheduled or a course advertised until approval is granted.

Unless the course applicant is a “school” as defined by NAC116A.175, the applicant must obtain a license from the Commission on Post Secondary Education (CPE) to teach the pre-certification course for which the provider has applied. The CPE licensure process is separate and apart from the course approval/accreditation by the CIC commission. CPE licensure must be obtained before submitting an application to the division. Contact CPE at (702) 486-7330 for further information.

To submit a classroom offering for approval:

- Obtain CPE licensure (if necessary).
- Carefully read the instructions on the application before completing.
- Fully complete all forms. Sign and date (dates to be current) all forms where applicable. Submit the application with all requested course materials (see pages 3 and 4 of this application) and fees to the division.
- A checklist of required items is provided on page 2 for the provider’s convenience. Check the column marked “X” to ensure the requested forms/materials are included before sending application to the division.
- ANNUAL RE-APPROVAL: Complete all forms the same way as for a new application. Submit changes to course content and/or the textbook. If course content and/or the textbook have not changed, provide a statement to that effect. **Nevada law portions of course content showing law updates must be submitted.**

Mail or hand-deliver completed course applications to the Las Vegas address above.

Course applicants are invited and encouraged to attend the meeting at which the application will be considered to answer any questions from the commissioners. Decision letters are mailed within two weeks after the meeting.

If you have any questions, please call the Office of the Ombudsman at (702) 486-4480 or send an email to Cameducation@red.nv.gov.

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Application Checklist

	X	Received		X	Received
Application Form 642			Proposed Schedule		
Complete Course information Sheet			Syllabus		
Course Module Sheet			Instructor application per NAC 116.264		
Signed Retention of Records			Resume with dates and detailed work history		
CPE licensure or exemption			Copy of licenses, certificates, transcripts, degrees		
Sample Attendance Sheet			\$100 fee		
Sample Certificate of Attendance			A Detailed Timed Outline (see #10 on page 3)		
Sample Refund/Cancellation Policy			Course Materials (plus videos/CDs as applicable)		
Copy of Grading System			Sample Handouts		
Physical Facility Description			Exam and answer key		



FOR OO INTERNAL USE ONLY

Application Received Date: _____ Initials: _____
Duplicate Course: Yes No CAM# _____ Duplicate Title: Yes No CAM# _____

.....
Application complete and accepted: Yes No Date: _____ Initials: _____

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**COMMUNITY MANAGER PRE-CERTIFICATION EDUCATION
CLASSROOM COURSE APPLICATION**

Course to meet the educational requirements for obtaining a
Nevada Community Manager Certificate

Please Type

Date: _____

1. Name of school: _____

2. Address: _____

3. Telephone: _____ Fax _____

4. e-mail address: _____ URL: _____

5. Names and addresses of all owners of school: _____

6. Type of school (college, university, adult education, etc.): _____

7. Purpose of school: _____

8. Provide the title for each course, the hours accredited, the course fee, and whether it is general or law:
(Please use Course Module Sheet, Page 6)

9. List all instructors name(s) below and attach Instructor Application, copy of appropriate license,
degree, certificates and resume indicating instructor qualifications per NAC 116.264.

9. Attach a proposed schedule of courses for the one-year accreditation period. The schedule must
include: the course title, proposed dates, times and locations of instruction.

10. Attach a **complete and detailed outline** of the course syllabus and teaching materials. The outline
must show the number of hours of instruction per subject in accordance with NAC 116. Include the
title, author(s) and publisher for any textbooks.

11. Attach a copy of handouts or course material that will be given to the students.

12. Submit the student catalog, which must contain the cancellation and refund policies.

13. Describe the facilities the provider will use for instruction.
14. Describe the school's grading system, including the methods of testing and standards of grading. Include a copy of each examination that will be used with the correct answer for each question.
15. List school requirements for attendance.
16. Location where student records will be maintained:

17. **Attach a copy of the renewal period School License issued by the Commission on Postsecondary Education (CPE), including all branch school licenses. For CPE Accreditation contact: Nevada Commission on Postsecondary Education, 1820 E. Sahara Ave., Suite 111, Las Vegas, NV 89104; Telephone: (702) 486-7330.**
18. Submit the "Course Information Sheet" for the course you wish to have accredited.
19. Submit the "Course Module Sheet" for the course you wish to have accredited.
20. The course application fee is \$100 per course. Amount enclosed: \$ _____
21. * I consent to auditing and/or evaluating by authorized representatives of the Office of the Ombudsman.
 - * I agree to report any material changes of the information contained in this application to the Office of the Ombudsman before presenting the amended course.
 - * I agree to retain attendance records for at least seven years from the date of the offering.
 - * I agree to provide completed certificates with original authorized signatures only to students who have successfully completed this course.
 - * I agree to comply with the provisions of NAC 116.

**Incomplete applications will not be processed and
fees are nonrefundable**

Submitted by:

<i>Signature</i>	<i>Date</i>
<i>Print Name</i>	

If executed in this state: "I declare under penalty of perjury that the foregoing is true and correct."

Executed on.....
(Date)	(Signature)

If executed outside this state: "I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct."

Executed on.....
(Date)	(Signature)

COURSE INFORMATION SHEET

Date of Application: _____ For Approval Period: _____

Course Title: _____

Instructor Names	Instruction Site

Course Fee: _____ Hours of Accreditation: _____

Hours of Classroom Attendance Required: _____

Number of Required Exams: _____

Attach a copy of each examination, with the correct answers stated or marked.

Minimum passing grade per test _____ Overall for the course _____

REQUIRED TEXTS AND OTHER READINGS FOR THIS COURSE		
Title	Author	

Statement of Course/Learning Objective:

COURSE OUTLINE. PLEASE PROVIDE A THREE-LEVEL OUTLINE OF THE COURSE CONTENT, AS WELL AS A TIME BREAKDOWN IN FIVE-MINUTE INCREMENTS.

60-HOUR PRE-CERTIFICATION COURSE MODULE SHEET

CLASS TOPIC

FEE

SESSION NO.

HOURS

1. Federal, state and local laws

20 Hours

Federal law

2 hours

Uniform Common-Interest Ownership Act (NRS 116)

18 hours

2. General instruction

40 Hours

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RETENTION OF PRE-CERTIFICATION EDUCATION RECORDS

Course: _____

Sponsor: _____

Contact Person: _____ Telephone Number: _____

As a provider of pre-certification education, the sponsor is required to maintain records of attendance as specified in the Nevada Administrative Code:

NAC 116.207 Conditions of approval; evidence of certain licensure.

1. If a school has applied for and received the approval of the Commission to offer courses to meet requirements for original certification under this chapter and [Chapter 116 of NRS](#), the school shall, as a condition of the approval:
 - (a) Maintain a record of attendance and certification for each student in any of those courses for 7 years after his enrollment and shall have such records open to inspection by the Division, upon its request, during the regular business hours of the school.
 - (b) Upon the request of a transferring student, furnish the school to which he is transferring a copy of his attendance record and certification for each of those courses which he has completed.
 - (c) Upon the request of a student, furnish the Division a transcript of the record of his grades and attendance.

Signature verifies that attendance records are kept in accordance with NAC116A.230 and are kept at the following listed location. In addition, it is understood that written notice must be given to the Office of the Ombudsman should any change in location occur.

Business Name

Street Address

City

State

Printed Name of Authorized Person

Title with Sponsoring Agency

Signed Name of Authorized Person

S*A*M*P*L*E
OFFICE OF THE OMBUDSMAN PRE-CERTIFICATION EDUCATION
ATTENDANCE VERIFICATION REPORT

Sponsor: _____ Instructor: _____

Course Title: _____ CAM# _____ Credit Hours: _____

Date: _____ Time: _____ Location: _____

Signature of Instructor: _____

ATTENDEES

CERT Y/N	Name (Printed or Typed)	Sign In	Time In	Initial Out	Time Out

NOTE: NAC 116A.230 (3)(d) (4) Attendance Report shall be maintained by the sponsor for a period of 4 years.

S*A*M*P*L*E

Certificate of Attendance

COMMUNITY MANAGER PRE-CERTIFICATION EDUCATION

Name

has attended and successfully completed a classroom offering

"TITLE"

PL # _____

_____ HOURS

on

Date

This course is sponsored by (SPONSOR NAME & ADDRESS)

(ORIGINAL) Authorized Signature

**THIS COURSE IS APPROVED BY THE NEVADA COMMISSION FOR COMMON-INTEREST
COMMUNITIES AND CONDOMINIUM HOTELS**