

## State Tax Commission Educational Program Approval Request

The State Tax Commission is responsible for providing education and training to assessing officers. The Commission may grant approval for educational institutions, organizations, or individuals to provide education and training to assessing officers.

An educational institution, organization, or individual who seeks to hold an assessor training program, course, or class shall submit a syllabus of the program, course, or class to the commission. The syllabus shall include all of the following information: (a) An outline of the course or classes offered. (b) The number of hours for each course. (c) The instructor to be used. (d) Reference and text material. (e) Any other pertinent information. The information shall be submitted not less than 30 days before the program is to be held.

Approval of an educational program, course, or class, may be requested of the State Tax Commission by completing this form and including all of the required information. This form is to be used to request approval of a level 3 or 4 educational course, or for a program, course, or class that provides educational elective renewal credit. This form is not to be used by an assessor seeking individual level 3, level 4 or elective credit; use *State Tax Commission Educational Credit Request* (Form 4651) to request that type of individual credit.

Submit the request to the following address:

Michigan Department of Treasury  
State Tax Commission  
PO Box 30471  
Lansing, Michigan 48909-7971

EDUCATIONAL PROGRAM, COURSE OR CLASS INFORMATION	
Name of Educational Program, Course, or Class (complete a separate form for each course or class)	Number of Course Hours
Name of Educational Institution, Organization or Individual to Hold Course	
Name of Instructor(s)	
Indicate Type of Credit Requested (Level 3, Level 4, Elective Renewal)	Course Frequency (once, annually, bi-annually, etc.)

REQUESTOR CONTACT INFORMATION		
Name of Requestor (must represent the institution, organization, or be the individual holding the course)		
Title or Position	Daytime Telephone Number	E-mail Address
Mailing Address (include City, State, ZIP Code)		