Education and Training Program Approval Application
Michigan Department of Licensing and Regulatory Affairs
Bureau of Construction Codes
P.O. Box 30255, Lansing, MI 48909
www.michigan.gov/bcc

PROGRAM APPROVAL NUMBER   (Office use only)

Authority: 2016 PA 407
Penalty: Failure to provide the information may result in denial of your request.

LARA is an equal opportunity employer/program. Auxiliary aids, services, and other reasonable accommodations are available upon request to individuals with disabilities.

Article 10 of Act 407 and the Building Official, Plan Reviewers, and Inspector Registration Rules requires the Construction Code Commission to review and approve educational and training programs offered to building officials, plan reviewers and inspectors to meet their continuing educational and training requirements as defined by the Act. Providers of educational and training programs shall complete this form and submit it to the address listed above with the required fee.

Instructors – You may **NOT** offer an educational or training program until approval has been granted from the Bureau of Construction Codes giving specific categories and hours of instruction. This will help eliminate discrepancies for course offerings. Please read and complete this application thoroughly and provide all requested information. Questions regarding completion of this form may be directed to section staff by emailing lara-bcc-educational@michigan.gov or calling at 517-241-9313.

Fee: The fee for **each program** is **$150.00**. Make check or money order payable to the **State of Michigan**.

Approval is evidenced by a program approval report prepared by the bureau and issued to the applicant. This will include the date, conditions, and period of approval. Approval is typically granted for the three-year registration cycle, or the remainder of the cycle.

Applicant Information (The name of the contact person provided below is the individual who may be contacted regarding the program. This person's name will appear on material distributed to registrants. If the application is made by an organization, association, or educational institution, please include the contact person.)

Contact Information

Organization/Association/Educational Institution (if applicable)_____

Contact Person_____ Phone Number (____)_____

Address_____ Email Address _____

City, State, Zip Code _____

Instructor Information

Name of Instructor:_____ Previously approved instructor number _____

Qualification(s) for instructing the course: _____

R339.5262(2) requires instructors to qualify based on the following experience or education:

1. A licensed, certified, or approved instructor at any of the following in this state: high school, intermediate school district, community college and/or public or private university. Please provide the name of your organization:

    _____

2. BCC, MIOSHA or any other federal, state, or local government agency. Please provide the name of your organization:

    _____

3. Currently licensed with at least 3 years of experience and equivalent qualifications in the subject matter being taught.

    Please provide license number: _____

Program Information

Program Name - Provide the name of the program as you wish it listed. *(A separate application is required for each program. List one program name only.)*

Program Purpose and Objective - A clearly defined statement of purpose and objective as it applies to Act 407 registered code officials must be provided.

Provide the basis, code or standards used for the development of the program.

Training equipment, teaching aids or instructional materials to be used.

What format will the course be provided? ☐ online ☐ in-person ☐ home study

Will this program be offered on a continual basis? ☐ Yes ☐ No

Is the program intended for a particular conference or seminar and offered only on a specific date?

☐ Yes ☐ No

If yes, provide the conference/seminar, location, and date(s).

CONFERENCE/SEMINAR_____

LOCATION_____

DATE(S) OF CONFERENCE/SEMINAR_____

Program Information (continued)

Identify the category/ies this program is designed to meet. If the program is Specialty or Technical, include the code inspector/official classification the program is intended for. (Note: If the program is designed to include more than one category, the curriculum or teaching outline must include the category identification by topic.) **Participants must attend the entire program to receive credit. Partial credits will not be given.**

☐ **Rules & Acts**- State public acts and state administrative rules, which must include technical writing, public speaking, laws, rules, and the administration and enforcement of related statutes and regulations.

Contact Hours – Provide the number of contact hours required to conduct the program.

Contact hours must be provided as *full* hours. _____**Hours**

☐ **Specialty** – Designed to increase an individual's knowledge of inspection and construction techniques in the various registration classifications.

Code Inspector/Official Classification _____

Contact Hours – Provide the number of contact hours required to conduct the program.

Contact hours must be provided as *full* hours. _____**Hours**

☐ **Technical** – Programs and courses designed to enhance an individual's understanding of state laws, state rules, and the state administration and enforcement of related statutes and regulations.

Code Inspector/Official Classification _____

Identify the code on which the program is based_____

(Technical hours are credited according to the code on which the program is based. Only those registered as enforcing those codes receive credit for attendance. If the program is designed to encompass more than one code, i.e., building, electrical, mechanical, or plumbing, this must be shown in your curriculum or teaching outline.)

Contact Hours – Provide the number of contact hours required to conduct the program.

Contact hours must be provided as *full* hours. _____**Hours**

☐ **Plan Review –** Programs to enhance an individual's ability to review and approve residential and commercial construction documents to determine compliance with applicable codes, standards, and statutes.

Contact Hours – Provide the number of contact hours required to conduct the program.

Contact hours must be provided as *full* hours. _____**Hours**

Identify the criteria or performance measurement to determine participants who successfully complete the program. You must provide a certificate of completion to attendees to meet requirements of renewal.

Program Information (continued)

Identify how the records of activities, course titles, attendance & course evaluation criteria are established.

Certification and Signature

I hereby certify all information contained in this application is true and complete. Falsification of this statement will result in my forfeiting any rights to continue to conduct this educational and training program.

Applicant's Signature _____

Date _____