



South Carolina  
Department of Labor, Licensing and Regulation



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Real Estate Commission

Henry D. McMaster  
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**ALTERNATIVE PRE-LICENSING EDUCATION DELIVERY APPROVAL FORM**

Provider Name: \_\_\_\_\_ Provider Number: \_\_\_\_\_

COURSE TITLE	COURSE #	HOURS	DELIVERY METHOD

PLEASE DESCRIBE FINAL EXAM PROCTORING METHOD (Additional information regarding proctoring may be attached):

PROVIDER CONTACT(PRINT) \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

*I (Provider) understand that alternative delivery of my provider's classroom pre-licensing education will be approved by the South Carolina Real Estate Commission on a temporary basis until June 30, 2021. I agree to provide Commission Staff/Inspectors access to audit the content and delivery method of the temporary approved alternative delivery education courses and proctoring method.*

PROVIDER AUTHORIZED REP SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PROVIDER AUTHORIZED REP NAME(PRINT) \_\_\_\_\_