

## COMMON INTEREST COMMUNITY BOARD

### Training Program Approval Information Sheet

**ALL APPLICATIONS, FORMS, AND REGULATIONS OF THE COMMON INTEREST COMMUNITY BOARD ARE AVAILABLE ON THE WEB AT <http://www.dpor.virginia.gov/Boards/CIC-Board/>.**

Applicants for a common interest community manager license must complete a training program in accordance with 18 VAC 48-50-30.L of the Board's *Common Interest Community Manager Regulations*. In addition, certified principal or supervisory employees must complete two hours of Board-approved common interest community fair housing training and two hours of common interest community law and regulation training as a condition of renewal. Certified individuals must complete training during the two-year certificate period immediately prior to the expiration date on the certificate. A training provider may obtain Board approval of a training program that meets the requirements of Part VI of the regulations. Four types of training programs may be submitted for approval.

1. Comprehensive training program – 80 contact hours in accordance with 18 VAC 48-50-250
2. Introductory training program – 16 contact hours in accordance with 18 VAC 48-50-250
3. Virginia common interest community law and regulation updates training program – 2 contact hours in accordance with 18 VAC 48-50-253
4. Fair housing training program encompassing Virginia fair housing laws related to common interest communities – 2 contact hours in accordance with 18 VAC 48-50-255

#### INSTRUCTIONS FOR SUBMITTAL

**Completed applications must be received no later than three weeks before the next scheduled meeting of the Common Interest Community Board.** The Board's scheduled meeting dates are available on the Board's website at <http://www.dpor.virginia.gov/Boards/CIC-Board/>. All complete applications for training program approval will be reviewed by the Board. All providers seeking approval of a training program must complete a CIC MANAGER TRAINING PROGRAM APPROVAL APPLICATION. If a training provider is seeking approval of more than one training program, a separate application must be completed for each. The following attachments must accompany each training program application. Please include a separator page to label each attachment with the number listed below. For example, "Attachment #1: Training Program Syllabus;" "Attachment #2: Instructor Information; etc." Please note that the information listed below is required, and applications that do not contain all of the required attachments, in the format and order listed below, will not be submitted for the Board's consideration.

- **Attachment #1: Training Program Syllabus** – provide a training program syllabus that lists the purpose of the training program and the main topics covered in the training program.
  - For comprehensive and introductory training programs, the syllabus must include coverage of the subject areas contained in 18 VAC 48-50-250.C of the *Common Interest Community Manager Regulations*. For each main topic in the syllabus, include the amount of time that will be devoted to that topic during the training program.
- **Attachment #2: Instructor Information** – Provide a one-page resume with a list of trade-appropriate designations, a summary of teaching experience, subject-matter knowledge, and qualifications for each instructor.
- **Attachment #3: Training Program Materials and Fees** – Provide information pertaining to any materials used or distributed during the training program, including copies of books, handouts, pamphlets, and slide presentations/overheads. Please indicate the fees that will be assessed for the training program and whether or not the fees include any materials for the training program and, if not, the materials that students are required to furnish.
  - For comprehensive and introductory training programs, a copy of the final, written examination and question item bank must be provided.

- **Attachment #4: Schedule of Training Program Dates and Locations** – Provide information pertaining to the anticipated schedule and location(s) for the training program. If a schedule has not been developed, please provide an anticipated start date for the program.
- **Attachment #5: Training Program Completion Certificate/Documentation** – Provide a copy, marked “sample”, of the certificate of completion or other documentation to be provided at the end of the training program to verify successful completion.
- **Attachment #6: Online/Correspondence Training Program Information** – If an online or correspondence training program, provide information on the security procedures to be utilized. In addition, provide information on the examination that will be given at the end of the training program and security related to the examination. Online training providers must provide the website address, a user ID, and a password to be utilized by the Board in order to access the training program during the review process. Correspondence training program providers must provide a copy of the packet that will be distributed to students.



**Common Interest Community Board  
 COMMON INTEREST COMMUNITY MANAGER  
 TRAINING PROGRAM APPROVAL APPLICATION**

A check or money order payable to the **TREASURER OF VIRGINIA**,  
 or a completed **credit card insert** must be mailed with your application package.  
**APPLICATION FEES ARE NOT REFUNDABLE.**

Type of Application (select one)	✕	Provider Fee (0505)	Course Fee (0506)	Total Fee Due										
Initial CIC Manager Training Program Approval	<input type="checkbox"/>	\$50.00	+ \$50.00	= \$100.00										
Additional CIC Manager Training Program (Course) Approval	<input type="checkbox"/>		\$50.00	= \$50.00										
CIC Manager Training Program Provider Number		<table border="1"> <tr> <td>0</td><td>5</td><td>0</td><td>5</td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>			0	5	0	5						
0	5	0	5											

- Name of Training Program Provider \_\_\_\_\_
- Mailing Address (PO Box accepted) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

- Street Address (PO Box not accepted)  Check here if the Street Address is the same as the Mailing Address listed above. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

- Email Address \_\_\_\_\_
- Website Address \_\_\_\_\_

6. Select **one** of the following and provide the information below about the business named above.

Business Federal Employer Identification Number (FEIN) ✧

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Federal Employer Identification Number (12-3456789)

✧ State law requires every applicant, *who is not a sole proprietor*, to provide a federal employer identification number. *Sole proprietors must provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.*

Sole Proprietor's Social Security Number **and/or**

				-			-				
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**Virginia** Department of Motor Vehicles Control Number \*

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DO NOT INCLUDE DASHES (1234567890)

➤ Enter the same identification number as used on examination, previous applications or licenses on file with the Department.

\* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the **Virginia** Department of Motor Vehicles.

- Contact Numbers  
 \_\_\_\_\_ Primary Telephone      \_\_\_\_\_ Alternate Telephone      \_\_\_\_\_ Fax

- Individual responsible for training program administration  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Telephone & Email Address \_\_\_\_\_

OFFICE USE ONLY	DATE	FEE	TRANS CODE <b>1020</b>	ENTITY #	FILE #/LICENSE # <b>05</b>	ISSUE DATE
	COMMITTEE REVIEW DATE		BOARD ACTION DATE		EFFECTIVE DATE OF APPROVAL	

9. Method of instruction (select **all** that apply)

- Classroom
- Correspondence
- Online
- Other distance learning, describe \_\_\_\_\_

10. Type of training program (only **one** per application)

- Introductory (16-hour minimum)
- Comprehensive (80-hour minimum)
- Virginia fair housing laws related to common interest communities (2-hour minimum)
- Virginia common interest community law and regulation updates (2-hour minimum)

11. Name of training program \_\_\_\_\_

Training program contact hours \_\_\_\_\_

12. List all instructors that will provide instruction in the training program. Trade-appropriate designations, as well as a professional resume with a summary of teaching experience and subject matter knowledge and qualifications will need to be submitted as Attachment #2 (see below). Attach a separate sheet of paper with the requested information if additional space is needed.

Subject areas and corresponding numbers are:

Subject Area Number	Training Program Subject Area
<b>Comprehensive and Introductory Training Required Program Subject Areas:</b>	
<b>1</b>	Governance, legal matters, and communications
<b>2</b>	Financial matters including budgets, reserves, investments, internal controls, and assessments
<b>3</b>	Contracting
<b>4</b>	Risk management and insurance
<b>5</b>	Management ethics for common interest community managers
<b>6</b>	Facilities maintenance
<b>7</b>	Human resources
<b>Virginia Fair Housing Laws and CIC Laws and Regulations Subject Areas</b>	
<b>8</b>	Virginia fair housing laws related to common interest communities
<b>9</b>	Virginia common interest community laws and regulations updates

Instructor's Name	CIC Manager License Number (if applicable)	Subject Area Number (insert numbers from above chart)
	05	
	05	
	05	
	05	
	05	
	05	

13. Summarize the applicant's qualifications and experience in providing training for common interest communities. If necessary, you may attach a separate sheet of paper.

14. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that the training provider has complied with all the laws of Virginia under the applicable provisions of Title 54.1, Chapter 23.3 of the *Code of Virginia* and all regulations of the Common Interest Community Board.

Responsible Person's Signature \_\_\_\_\_

Printed Name of Signatory \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

**The following attachments must accompany each training program application.** Please include a separator page to label each attachment with the number listed below. For example, "Attachment #1: Training Program Syllabus;" "Attachment #2: Instructor Information;" etc. Please note that the information listed below is required, and applications that do not contain all of the required attachments, in the format and order listed below, may not be submitted for the Board's consideration.

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