STATE OF CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION OCCUPATIONAL & PROFESSIONAL LICENSING DIVISION Swimming Pool Builder License Type - SPB CONTINUING EDUCATION PROVIDER APPLICATION 2020 RENEWAL YEAR

ALL SUBMITTALS MUST BE APPROVED PRIOR TO CLASS OFFERING

School Name:		
Address:		
Telephone		Facsimile No:
Contact Name(s):		
Email Address:		
Course Name:	<u>CE SPB 2020</u>	
License Type Cover	ed: <u>SPB</u>	Classroom Hours: <u>4</u>
Date(s) of Course:		Location of Couse:

The application for each course must include, but not be limited to, the following:

		Yes	Commission Use Only
1	Detailed course outline/syllabus		
2	Copy of text and/or related teaching materials		
3	Copy of certificates to be issued **		
4	Copy of all proposed advertising and publicity		
5	Names, addresses, and qualifications or resumes of all instructors to be used		
6	Policy regarding tuition, related costs, cancellation and refund		
7	Locations of all classrooms		
8	Fire Marshal form for each classroom location		

Remarks:

Name(s) of Authorized School Representative:

Signature of Authorized School Representative

Date

* Certificates to students shall be on official school stationary showing: school name, school code, name of licensee, number and type, name of course, classroom hours, and signature of the school official. Data of such shall be transmitted to collection vendor.

**Data of such class attendance shall be transmitted to collection vendor (PSI).

INSTRUCTIONS TO "PROVIDERS" OFFERING CONTINUING EDUCATION FOR Swimming Pool Builder type SPB

1. Each provider is required to submit one paper copy and one electronic copy of their curriculum to the Commissioner of Consumer Protection for review and approval.

2. Each submission shall include all documentation listed below:

*Note: Any submission that does not include all of the documentation below will be considered incomplete and will not be approved.

- Application (must be completely filled out)
- Certificates of Insurance
- CT Sales Tax Certificate (Form OR-138) for CT held classes
- School Status (Proof of private, public, trade union or trade association)
- Experience (Proof of educational training experience in trade)
- Certificates Copy of certificates to be issued to attendees must indicate course tile. ** Certificates to students shall be on official school stationary showing: school name, school code, name of licensee, license number and type, name of course, classroom hours, and signature of the school official.
- Fire Marshall Certificate (Indicating acceptable use of each facility)
- Advertisements (Copy of all advertisement to be used)
- Policies (Copy of school policies for tuition, related costs, cancellations/refunds)
- Offerings (Dates, hours and locations of all classes)
- Instructors (Names, addresses, license numbers and qualifications of all instructors that will be teaching. <u>Any changes to the instructor list must be submitted for additional approval.</u>)
- References (List of all reference materials to be used)

- Copyrights (Copyright approvals for any copyright material to be used)
- Teaching aids (Copy of any teaching aids such as power point etc.)
- If applicable, the provider shall provide the Department with a copy of the handout that will be bound and distributed to each attendee, which may contain laws and standards, power point presentations, calculations, or any other related course items.

3. "Providers" shall not offer any continuing education classes on the premises of any employer.

4. "<u>Providers</u>" who desire to "add" any training locations that have not been previously approved to their schedules, must submit for approval, such locations to the Commissioner of Consumer Protection at least 60 days prior to the intended date of usage.

5. "Providers" must make accommodations for those attendees with special needs or other disabilities.

6. "Providers" are required to have each attendee sign a "sign in/sign out" sheet at the beginning of each class at the end of each class and each and every time any breaks are provided for items such as lunch etc., excluding bathroom breaks. Attendance sheets are to be kept in "Providers" files for four (4) years with other continued education documents for future reference.

7. Certificates of course completion shall not be distributed to any attendee until the very end of the class, at which time the person whom is named on the certificate must be present and have attended all of the prescribed hours of the class before the certificate is issued to such person. No certificates shall be issued to any person who is not in attendance at the end of the class.

8. At the completion of all "approved" continuing education courses, all schools must provide PSI Examination Services an electronic file for each of their students. Such electronic file shall comply with all of the mandated fields as required by PSI and their reports. All reports must be transmitted to PSI within 30 calendar days of each completed course. Failure to comply with this requirement is cause for suspension of providers program by the Department of Consumer Protection.

9. Providers must comply with the State of Connecticut, Regulation of the Department of Consumer Protection Concerning Continuing Education for Plumbers, Sec 20-334d.

10. When all of the above conditions are meet, the provider will receive a notification letter indicating that their program has been approved. Without receipt of this notification letter, you may not hold any classes or advertise for any classes. Failure for you to comply with this or any other requirement of this program is cause for suspension of your program.

DEPARTMENT OF CONSUMER PROTECTION CONTACT INFORMATION:

Richard M. Hurlburt, Director Department of Consumer Protection Occupational and Professional Licensing Division 450 Columbus Blvd., Suite 901 Hartford, CT 06103 Email: dcp.occupationalprofessional@ct.gov Phone: 860-713-6135 FAX: 860-713-7230 Agency Web site: www.ct.gov/dcp

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC SAFETY

DIVISION OF FIRE, EMERGENCY & BUILDING SERVICES OFFICE OF STATE FIRE MARSHAL



On	n <i>(date)</i> , the	(Town/City)	Office
of t	the Fire Marshal conducted an inspection	of (name of facility)	
loc	ocated at (address)		in the
City	ity/Town of	to determine the de	egree of
cor	ompliance with the fire safety requirements	of Connecticut General Statutes	Chapter 541 as
aut	uthorized by Section 29-305 of the statutes	This facility was evaluated as a	(new/existing)
	(occupancy classification)	_as classified by
the	e CONNECTICUT FIRE SAFETY CODE.	As a result of this inspection, the t	following
cor	onditions were found:		
I.	At the time of inspection, no code violations were	dentified. Certificate of approval recor	nmended.
II.	At the time of inspection, conditions were discover codes. An acceptance plan of correction was sub recommended.	,	
III.	. At the time of inspection, conditions were discover codes. No approved plan of correction was submining NOT recommended.		

IV. Based on the extreme hazard to the public safety discovered at the time of this inspection, this office is currently seeking an injunction from the court through our Town/City Attorney for the purpose of closing or restricting usage of this facility by the public. (See attached information) Certificate of approval NOT recommended.

Fire Marshal

Date

City or Town

Please Note: A fire marshal inspection is valid for one year from the date of the last inspection.

Attention All Connecticut Approved Continuing Education Providers

VERY IMPORTANT

Connecticut continuing education mandatory approved school reporting method for:

1) Real Estate License holders.

- 2) Electrical License holders.
- 3) Plumbing and Piping License holders.

5) Home Inspectors license holders.

6) Real Estate Appraisal license holders.

7) Spa and Pool license holders.

The Department of Consumer Protection has implemented a new integrated computer system for the maintaining and tracking of all its licensing records. This system meets many of the objectives in being able to provide better quality of service to consumers in the processing of applications and availability of information to licensees and consumers.

Effective immediately, at the completion of all "approved" continuing education courses; all schools **must provide** PSI an electronic file for each of your students.

Please be advised, as an Approved Provider, this is a requirement. You MUST provide this information within 10 days from the continuing education instruction day.

All correspondence and technical support should be initiated with an email sent to schoolsupport@psionline.com. Your email should clearly state your provider name and the name and phone number of who to contact, and the nature of the problem. PSI technical support will promptly respond to you through an email reply or phone call if necessary. The site is currently available for you to use to practice uploading sample files.

To access the site please follow these steps:

1. Go to http://schools.psiexams.com

2. Log in using the following information:

ACCOUNT ID: LOGIN NAME: PASSWORD:

(Note: This information is unique to your school and must be kept secure. Please contact PSI immediately if this information is compromised and needs to be changed.)

3. After logging in you will be able to upload your tab-delimited file of candidates or enter individual candidate information one by one. A detailed description of how to do this is available at <u>http://schools.psiexams.com/information.jsp</u>

This automation of information will allow the Department of Consumer Protection to be able to enforce 100% the requirements of all licensees fulfilling their continuing

education requirements, when comparing the list of those that renew such license, as well as eliminating the need for licensees to provide copies of proof of continuing education courses. They anticipate that this should aid schools in the additional work of supplying lost copies as well as increasing attendance to required continuing education classes.

Please note that there will be a charge of \$1.00 for each candidate submission. During the upload process, you will be asked for credit card information for this charge.

If you need further technical assistance, please call PSI ESTech at 1(800) 367-1565.

The fields that you will be collecting and entering are as follows:

field name	length	datatype	mandatory	description
Last Name	50	characte r	YES	Candidate's Last Name
First Name	50	characte r	YES	Candidate's First Name (Legal Name - no nicknames)
Completion Date	10	characte r	YES	10 digit character (like 01/15/2004)
School Code	4	characte r	YES	4 digit School Code
Prefix	3	characte r	YES	3 digit prefix: Real Estate Salesperson: RESJ, Real Estate Broker: REB Electrical: ELC, Plumbing: PLM, Home Inspector: HCE
License Number	9	characte r	YES	Up to 9 digits , like 4444444, no comma's , dashes , periods , etc.
License Type	5	characte r	ND	Up to 5 digit License Type (must enter using following format: C2, HPG1, PP1 (Not required for Real Estate candidates).
Hours Completion	2	characte r	YES	1 or 2 digit character
Year for Renewal	4	characte r	YES	4 digit character , like 2008
School Name	50	characte r	YES	For example, Hurlburt Consolidated School
Course Title	50	characte r	YES	For example, Fair Housing and Law

STATE OF CONNECTICUT

DEPARTMENT OF CONSUMER PROTECTION OCCUPATIONAL & PROFESSIONAL LICENSING DIVISION

EVALUATION FORM FOR CONTINUING EDUCATION COURSE

(To be filled out by the student and mailed to the address below)

Date:	Student Email Address:		Phone:
Student Name:		License Number:	
School Name:		_Course Name:	
Location of Class:	Tim	ne: Date:	

The Occupational & Professional Licensing Division of Connecticut requests that each instructor be evaluated by the students at the end of the course. Please rate your instructor and course on a scale of one to four in the following categories. Circle your choice.

INSTRUCTOR / FACILITY		POOR FAIR		GOOD	VERY GOOD
1.	Started and ended class on time	1	2	3	4
2.	Instructor's delivery of subject matter	1	2	3	4
3.	Level of preparation for the class	1	2	3	4
4.	Knowledge of the subject	1	2	3	4
5.	Ability to answer questions	1	2	3	4
6.	Rapport with the class	1	2	3	4
7.	Made learning enjoyable	1	2	3	4
8.	Enthusiasm	1	2	3	4
9.	Depth of coverage	1	2	3	4
10.	Taught the course as it was advertised	1	2	3	4
11.	Gave me information that will benefit	1	2	3	4
12.	Overall evaluation of the Instructor	1	2	3	4
13.	Registration process	1	2	3	4
14.	Staff handled in a professional manner	1	2	3	4
15.	Materials (handouts)	1	2	3	4
16.	Course content	1	2	3	4
17.	Overall evaluation of the course	1	2	3	4
18.	Accommodations of Facility	1	2	3	4
	nents:				

Mail to:Department of Consumer Protection
Occupational & Professional Licensing Division
Richard M. Hurlburt, Director
450 Columbus Boulevard, Suite 901
Hartford, Connecticut 06103(860) 713-6135

Laws and Regulations:

Continuing Education Requirements for SPB license type

Continuing education for the swimming pool builder license.

Type SPB

Continuing education is due every year and must be reported to State vendor PSI, prior to renewal of the SPB license.

License type expires April 30th of each year.

Regulations of Connecticut State Agencies

Sec. 20-340d-3. Continuing education

(a) Continuing education for the swimming pool builder license shall consist of not less than three (3) hours of technical instruction and one (1) hour of business and law instruction, to be completed every year, or as determined by the Commissioner of Consumer Protection, as a requirement of license renewal.

(b) Providers of continuing education instruction shall obtain curriculum approval from the Department prior to offering each continuing education course for credit.

Three (3) hours of technical instruction and one (1) hour of business and law instruction, to be completed every year.

Note: SPB license holders must also take an additional distinct class if they hold SP-1 or SP-2 maintenance and repair license.

Note: Business and law instruction may include Connecticut statutes and regulations pertaining to licensure, State adopted building codes and standards, Code of Federal Regulations pertaining to OSHA.