

STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE DIVISION OF REGULATORY BOARDS LOCKSMITH LICENSING PROGRAM 500 JAMES ROBERTSON PARKWAY, 2ND FLOOR NASHVILLE, TENNESSEE 37243-0570 615.532.3369 FAX 615.532.2965 www.tn.gov/commerce/boards

LOCKSMITH LICENSING PROGRAM EDUCATION INSTRUCTOR APPLICATION

Administrative Rule 0780-5-13-.10(2)

(2) Instructor qualifications and requirements. A person seeking approval as an instructor shall submit an application on a form prescribed by the Commissioner. If granted, the approval as an instructor shall be valid for a period of two (2) years from the date of the approval.

(a) An instructor shall have one (1) of the following qualifications:

- 1. Three (3) years recent experience in the subject matter being taught; or
- 2. A minimum of an associates degree in the subject area being taught; or
- 3. Two (2) years of recent experience in the subject area being taught and
- twelve (12) hours of college credit or vocational technical school technical credit hours in the subject being taught; or
- 4. Other educational, teaching or professional qualifications determined by the Commissioner which constitute an equivalent of one (1) or more of the qualifications in parts (2)(a)1., 2., and 3 of this rule.

INSTRUCTOR INFORMATION:

Last Name	First Name	Middle Initial
Employment or Training Affiliat	ion	
Mailing Address		
City	State	Zip Code
Area Code & Phone Number	Area Code & Fax Number	Email Address
Name and location of Training	Facility where courses are instructed	
	e listing the instructor's qualifications, a documentation that would support your	
Program Use Only:		

Program Use Only: Date Reviewed: Commissioner Comments:	_ Approved:	Yes	No	
Instructor Provider Number:			Exp Date:	-