



AGENT REGISTRATION

“Agent” means a person employed by or for a career school for the purpose of procuring students, enrollees or subscribers by solicitation in any form, made at a place or places other than the school office or place of business of such school (ORS 345.010 (1)).

Please attach a photocopy of agent’s school issued photo credentials (i.e. badge), as described in OAR 715-045-0061(6).

The School does not employ any agents.

(If this box is checked, only signature of director is required.)

School name: _____

Address: _____

Agent’s geographic area: _____

Date of employment: _____

AGENT INFORMATION

Applicant Name		Date of Birth	**Social Security #
E-Mail Address		Home Phone <i>(include area code)</i>	
Home Address		Alternate Phone <i>(include area code)</i>	
City	State	Zip Code + 4	

Have you ever been convicted of a crime other than a minor traffic violation?

Yes No

If answer is “yes,” attach explanation on separate sheet OAR 715-045-0012(13).

I hereby certify the above information is true and correct
to the best of my knowledge.
I AM AWARE THAT IF ANY STATEMENT MADE HEREIN HAS BEEN MISREPRESENTED,
MY REGISTRATION AS AN AGENT MAY BE SUSPENDED OR REVOKED

Agent Signature

Date

I CERTIFY THAT THIS AGENT COMPLIES WITH ALL REQUIREMENTS AS SPECIFIED IN
OREGON ADMINISTRATIVE RULE 715-045-0061.

Signature of Director

Date

Print Name of Director

Title

*****Social Security Number Requirement, Authority, and Disclosure Statement***

As part of your application for an initial or renewed registration as a teacher, director, or agent for a licensed private career school, as issued by the Higher Education Coordinating Commission, Office of Private Postsecondary Education, you are required to provide your Social Security Number (SSN) to the Commission as part of the application process. ORS 25.785 and 42 USC § 666(a)(13)

Your SSN will be stored in the Commission's electronic database using the highest level of encrypted security protocols. It will be provided on a quarterly basis to the Oregon Department of Justice through secured electronic means for the purpose of enforcing child support orders. Your SSN will not be printed or displayed in any public forum through any medium unless expressly required by state or federal law.

Failure to provide your SSN will be a basis for the Higher Education Coordinating Commission, Office of Private Postsecondary Education, to refuse to issue or renew a license or registration as described above.

Any other use or disclosure of your SSN will require your written authorization.

**For further information or assistance please contact
Office of Private Postsecondary Education
Phone (503) 947-5716 or Email Info.PPS@state.or.us**