**APPLICATION FOR DEBT MANAGEMENT SERVICE PROVIDER**

**CONSUMER EDUCATION PROGRAM**

FOR OFFICE USE ONLY

PROGRAM # \_\_\_\_\_\_\_\_\_\_\_

Approval Date\_\_\_\_\_

Approved By\_\_\_\_\_\_

Denial Date:\_\_\_\_\_\_

Denied By: \_\_\_\_\_\_\_

Amount Fee Paid:\_\_\_\_\_\_\_

Check Number:\_\_\_\_\_\_\_\_\_

Cash Number:\_\_\_\_\_\_\_\_\_\_

**Bureau of Consumer Credit Protection**

**35 State House Station**

**Augusta, ME 04333-0035**

**PH: (207) 624-8527**

**FAX: (207) 582-7699**

**GENERAL INFORMATION:**

1. NAME OF DEBT MANAGEMENT SERVICE PROVIDER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Company or organization applying for program approval)

2. CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Person whom the Bureau should contact regarding program questions or approval)

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_

Phone: ( ) \_\_\_ - \_\_\_\_\_\_\_\_\_\_ FAX ( ) \_\_\_ - \_\_\_\_\_\_\_\_\_\_

Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EDUCATIONAL PROGRAM INFORMATION:**

3. INSTRUCTOR(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. FORMAT: (please check all that apply)

[ ]  Live/Classroom Setting [ ]  Audio/Video

[ ]  Computer [ ]  Distance Learning

[ ]  TV (includes satellite & ITV) [ ]  Internet

5. IS COURSE APPROVED IN OTHER STATES? \_\_\_\_\_ (If yes, list states)

6. REQUIRED ATTACHMENT. Attach to this form a copy of all course materials, outline and/or screen prints that constitutes this consumer education program or plan designed to improve the financial literacy of consumers, pursuant to the requirements of 32 MRSA §6174-B (2).

7. COST TO CONSUMER: $\_\_\_\_\_\_\_\_

 (cannot exceed $50)

8. DESCRIBE HOW CONSUMERS’ FINANCIAL LITERACY IS IMPROVED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. APPLICATION FEE: The application fee is $100. Make check payable to, “Treasurer, State of Maine.”

**CERTIFIED STATEMENT AND SIGNATURE OF PROGRAM SPONSOR OR AUTHORIZED OFFICIAL:**

By my signature, I hereby agree to abide by the requirements and conditions set forth by the provision of 32 M.R.S.A., c. 80-A, the Debt Management Services Act, administered by the Maine Bureau of Consumer Credit Protection. I certify that the information contained in this application is accurate and true to the best of my knowledge and belief.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

The following is included for you reference:

**32 MRSA §6174-B - Counselor certification; consumer education program**

Consumer Education: A debt management service provider shall offer a consumer education program approved by the administrator. A debt management service provider may charge a reasonable fee for the program not to exceed $50.