

FAMP EDUCATION REGISTRATION FORM

Course Title: 4-Hour State of Florida Loan Originator Test Prep By the end of this course, participants will:

This 4-hour State of Florida Loan Originator Test Prep Course is designed to provide the necessary knowledge to prepare you for the Florida portion of the S.A.F.E. Mortgage Licensing Act mandated loan originator state exam. The State of Florida Loan Originator exam covers state law and regulations, license law, compliance, disciplinary actions and the Florida Office of Financial Regulation.

- Review F.S. 494 and 69V-40 compliance with regards to conduct, fees, agreements, disclosures and practices
- Understand F.S. 494 and 69V-40 license law and regulation regarding licensure requirements, disciplinary actions, revocations and maintenance
- Be aware of the FLOFR's authority and abilities
- Familiarize themselves with state law and regulation definitions
- Learn Florida specific laws, requirements and tax calculations



POLICIES

Photo ID required at check-in

Attendees must make reservations by the deadline to be assured of materials and a seat in the classroom. It is up to the chapter to determine if a walk-in may attend. The chapter may assess a late fee (plus the cost of the seminar). Materials and certificates will be mailed at a later date by FAMP Headquarters.

Materials are only available to attendees who attend the seminar.

Anyone arriving 15 minutes past commencement of the class will not receive credit for the class and will not receive a refund. Late arrivals may be able to attend the class based on seating availability.

The State of Florida requires that we report CE credits electronically. Your SSN is required. Numbers will be kept confidential.

January 19, 2011

Broward Chapter | 1:00pm - 5:00pm

Location:

Broward Community College

3501 SW Davie road

library, Bldg. 17, Room 425

Davie, FL 33314

PRICING (includes manual)

FAMP Members - \$25 per seminar

Non-Members - \$25 per hour per seminar

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|------------------|-------|
| Members | \$25 |
| Non-Member | \$100 |

Check Visa M/Card AmEx

Name _____

FAMP Membership # _____

NMLS# _____ MLO# _____

Company _____

Billing Address for Credit Card _____

(Address continued) _____

City _____ State _____ Zip _____

E-mail _____

Phone _____

Card Number _____ Exp. Date _____

Name as it Appears on Card _____ V-Code _____

Signature _____

If you have special needs addressed by the Americans with Disabilities Act, please check the space provided here and attach a statement regarding your requirements:

YES, I require ADA assistance.

Mail payments to
 FAMB - 1292 Cedar Center Drive - Tallahassee, FL 32301
 Questions - Call FAMB Headquarters 850-942-6411
 Pay online at www.myfamp.org