DEPARTMENT OF CONSUMER AFFAIRS
PFB
PROFESSIONAL FIDUCIARIES BUREAU

Professional Fiduciaries Bureau
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STATE OF CALIFORNIA
dca
DEPARTMENT OF CONSUMER AFFAIRS

COURSE APPROVAL OR CANCELLATION APPLICATION

California Code of Regulations, Title 16, sections 4444 and 4448 (e)

☐ COURSE APPROVAL—Check this box for course approval. Type or print all entries and provide a copy of the course syllabus.

☐ COURSE CANCELLATION—Check this box for cancellation of a class and complete Provider/Business Name and sections 1, 2, and 3 only. Type or print all entries.

PROVIDER/BUSINESS NAME: _____

1. Course Title:
2. Instructor(s) Name:
3. Date(s) Course Will be Offered:
4. Course Location & Phone Number:
5. Cost of Course:
6. Course Delivery: ☐ Classroom ☐ Online ☐ Video ☐ Other (please specify) _____
7. Website Link (if applicable):
8. Overview/Description (please use additional sheet if needed):
9. Course Topic: ☐ Conservatorship ☐ Guardianship ☐ Trusts ☐ Durable Power of Attorney ☐ California Court Systems ☐ Ethics
10. Credit Type and Number of Hours: ___ Conservatorship ___ Guardianship ___ Trusts ___ Durable Power of Attorney ___ California Court Systems ___ Ethics
11. Is course approved by another agency? If Yes, which one(s)?
12. Contact Person: Name _____ Signature _____ Phone Number _____ Date _____