



# STATE OF SOUTH CAROLINA DEPARTMENT OF CONSUMER AFFAIRS

## PROFESSIONAL EMPLOYER ORGANIZATIONS

### Mailing Address

P.O. Box 5757  
Columbia, SC 29250-5757

S.C. Code Ann. § 40-68-10 et seq.

[www.sccconsumer.gov](http://www.sccconsumer.gov)

(803) 734-4200

### Street Address

2221 Devine St. Suite 200  
Columbia, SC 29205

## 2010-2011 CONTINUING PROFESSIONAL EDUCATION COMPLIANCE FORM

South Carolina Code Section 40-68-45 states as follows:

- (A) (1) Effective for license years beginning after September 30, 2005, key management personnel of all licensees must complete at least eight hours of continuing professional education annually.
- (2) For purposes of this subsection: (a) if the licensee is a sole proprietorship or partnership, key personnel means any controlling person, as defined in this chapter, of that licensee. (b) if the licensee is a corporation, key personnel means any person who both: (i) possesses the power to direct or cause the direction of the management of a company seeking to offer professional employment services in this State; and (ii) is directly responsible for the day-to-day management of the company's operations in this State.
- (3) The holder of a nonresident restricted license under Section 40-68-90 is not required to complete the continuing education required by this subsection.
- (4) Up to eight hours of continuing professional education may be carried forward from one year to the next year; for the license year beginning September 30, 2005, up to eight hours of continuing professional education taken in the preceding twelve months may be carried forward.
- (B) (1) Continuing professional education must be reported to the department annually on a form approved by the department showing the date and title of the courses taken, the teacher or sponsor of the course, and the hours of continuing professional education claimed for the course. If the course is taught in a classroom setting, fifty minutes of classroom contact equals one hour of continuing professional education. Course sponsors shall maintain records of attendees for two years after the course.
- (2) Documentation of attendance at the courses or correspondence courses must be maintained by the licensee and must consist of a certificate of completion issued by the teacher or sponsor of the course showing the number of hours of continuing professional education completed. This documentation is subject to inspection by the department for up to two years after the date of the course. Courses offered by the National Association of Professional Employer Organizations, the Carolina Chapter of Professional Employer Organizations, the department, or other approved courses related to employment, are considered qualified courses for continuing professional education. The department shall offer continuing professional education courses to assist licensees and controlling persons in obtaining the continuing professional education required by this chapter.
- (3) The department shall appoint four licensees or controlling persons and one representative of the department to a panel for two-year terms to approve any courses questioned as to their qualifications as continuing professional education. The panel may conduct its meetings via conference call. The department shall develop a questionnaire to ascertain the interest and background of potential members of this panel.

(4) If a licensee fails to complete his continuing professional education in a timely manner, his license expires and the licensee shall pay a penalty not in excess of one hundred dollars in order to renew the license. If a controlling person, who is not an owner or officer, of a licensee fails to complete his continuing professional education in a timely manner, he may not continue as a controlling person. However, the licensee or controlling person may request an administrative hearing to appeal the expiration of his license, or controlling person status, respectively, for failure to complete continuing professional education requirements. A license may be renewed without penalty within thirty days after its expiration if the licensee completes his professional education requirement. If a licensee fails to complete his professional education requirement within thirty days after the expiration of his license, he shall, in addition to paying the penalty provided for in this subsection, complete his professional education requirements prior to filing a new initial application for a license.

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In addition to these sources, the Department has determined that it will recognize required continuing education hours from other professions such as law, accounting, and human resources, as long as the courses are reasonably related to employment. Credit can also be obtained from courses provided by private companies, on a for-fee basis or as part of an in-house education program. For all these methods, copies of the materials must be provided so that they can be reviewed and approved by our continuing education committee. As required by the law, proof of attendance at all courses is required.

Please provide all information requested below:

Full Name of Controlling Person: \_\_\_\_\_

Name of PEO or PEO Group: \_\_\_\_\_

Business Address: \_\_\_\_\_

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

Telephone No.: \_\_\_\_\_ Fax No. \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Applicant's present position with PEO is:

Owner      Ownership % \_\_\_\_\_

Officer       Director       Manager

Other: \_\_\_\_\_



**AFFIDAVIT**

I swear or affirm and certify that I have provided all information required on this form, and to the best of my knowledge and belief, all information contained herein is true, correct and complete; and that there are no material omissions of fact. I further certify that I understand that giving false information constitutes cause for revocation of my license and subjects me to criminal prosecution for perjury. I acknowledge that I have a duty and agree to update and correct this information as it changes.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Type or Print your name and Title

SWORN TO AND SUBSCRIBED before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

(SEAL)

\_\_\_\_\_  
Notary Public For \_\_\_\_\_

My Commission Expires:  
\_\_\_\_\_

**The completed form should be submitted to:**

South Carolina Department of Consumer Affairs  
Attn: PEO Licensing and Regulation  
P.O. Box 5757  
Columbia, SC 29250-5757

**Do not fax this form. An original, signed and notarized form is required.**

**The South Carolina Freedom of Information Act may require the Department of Consumer Affairs to release this form as a public record; however personal identifying information will be released only if required by law.**