



LOUISIANA DEPARTMENT OF INSURANCE  
 JAMES J. DONELON  
 COMMISSIONER

## BAIL BOND APPRENTICESHIP PROGRAM REGISTRATION FORM

Form can be e-mailed to [producerlicensing@ldi.la.gov](mailto:producerlicensing@ldi.la.gov) or faxed to (225) 342-3754

| <b>APPRENTICE INFORMATION</b>           |                        |                                |          |
|---|------------------------|--------------------------------|----------|
|   |                        |                                |          |
| Name (First Middle Last)                | Social Security Number | Date of Birth                  |          |
|   |                        |                                |          |
| Telephone Number                        | e-mail address         | Start Date of Apprenticeship   |          |
|   |                        |                                |          |
| Resident Street Address                 | City                   | State                          | Zip Code |
| <b>SUPERVISING PRODUCER INFORMATION</b> |                        |                                |          |
|   |                        |                                |          |
| Name                                    | License Number         | e-mail Address                 |          |
|   |                        |                                |          |
| Affiliated Business Entity Name         |                        | Business Entity License Number |          |
|   |                        |                                |          |
| Business Street Address (no PO Box)     | City                   | State                          | Zip Code |

By signing and submitting this registration form, the apprentice and the supervising producer confirm that they understand the following requirements of the Bail Bond Apprenticeship Program:

- The date listed in the Start Date field is at least 10 days from the date this form is filed with the Louisiana Department of Insurance (LDI).
- The apprentice will work solely under the direct supervision of the licensed individual bail bond producer identified above for three (3) consecutive months and will work no less than twenty-four (24) hours per week.
- The apprentice and the supervising producer shall notify the LDI within fifteen (15) days if any of the above information changes.
- The supervising producer shall notify the LDI of the termination of an incomplete apprenticeship within fifteen (15) days.
- This apprenticeship will terminate if not completed within six (6) months of the date of initial registration.
- The apprentice must complete a bail bond producer prelicense education program as provided for in R.S. 22:1571 before the end of the apprenticeship program.
- An apprentice may not participate in the bail bond apprentice program if the apprentice is a sexual offender or serial sexual offender as defined in R.S. 15:536.
- The sole purpose of this registration form is to record the start date of an apprenticeship. The recordation of this apprenticeship does not constitute approval by the LDI, an employer waiver pursuant to La. R.S. 22:1554 A (18) or granting of consent pursuant to 18 USC 1033. Apprentices and supervising producers have read and understand the guidance set forth by Advisory Letter 2018-02.

\_\_\_\_\_  
 Signature of Apprentice

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Supervising Producer

\_\_\_\_\_  
 Date