

# Educational Concepts Pre-Licensing Schedule

**Location:** All classes are held at **3301 W. Main, Belleville, IL** from **8 a.m. – 5 p.m.**  
**LATE ARRIVALS MAY NOT BE ADMITTED TO CLASS. STATE LAW REQUIRES 7.5 HOURS IN CLASS.**  
 (FOR DRIVING DIRECTION USE EITHER YAHOO OR GOOGLE, DO NOT USE MAPQUEST.)

## LIFE, ACCIDENT/HEALTH

August	September	October	November
August 5 & 6, 2021	September 2 & 3, 2021	October 14 & 15, 2021	November 8 & 9, 2021
August 19 & 20, 2021	September 16 & 17, 2021	October 28 & 29, 2021	November 22 & 23, 2021
	September 30 & October 1, 2021		

## PROPERTY/CASUALTY

August	September	October	November
August 9 & 10, 2021	September 9 & 10, 2021	October 4 & 5, 2021	November 1 & 2, 2021
August 23 & 24, 2021	September 20 & 21, 2021	October 21 & 22, 2021	November 18 & 19, 2021

**\*\*\*\*\*PRICE INCLUDES ONLINE TEST SIMULATOR\*\*\*\*\***

» **Select Class:** \_\_\_\_\_ Life Only (\$185) \_\_\_\_\_ Accident/Health Only (\$185) \_\_\_\_\_ Life, Accident/Health (\$249)\*  
                           **Day 1 & ½ Day on Day 2**                    **Day 2 only**    **Day 1 & Day 2**

» **Select Class:** \_\_\_\_\_ Property Only (\$185) \_\_\_\_\_ Casualty Only (\$185) \_\_\_\_\_ Property/Casualty (\$249)\*  
                           **Day 1 & ½ Day on Day 2**                    **Day 2 only**    **Day 1 & Day 2**

\*If registering for both Life, Accident & Health and Property/Casualty classes at the same time, there is a \$50 discount. The cost for the combined classes is \$448.

» **Select Class Date:** \_\_\_\_\_

**ADVANCED PAYMENT REQUIRED TO RECEIVE STUDY MATERIAL PRIOR TO CLASS.**  
**24 HOUR CANCELLATION IS REQUIRED.**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Email Address** \_\_\_\_\_ **Daytime Phone #** \_\_\_\_\_ **cell/home/office**

*Circle One*

**METHOD OF PAYMENT:** VISA      MASTERCARD      DISCOVER      AMERICAN EXPRESS      CHECK # \_\_\_\_\_

NAME ON CARD (IF NOT THE STUDENT) \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CREDIT CARD NUMBER \_\_\_\_\_ EXP. \_\_\_\_\_ SEC. CODE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

EDUCATIONAL CONCEPTS UNLIMITED, INC.  
 3301 W. MAIN, BELLEVILLE, IL 62226  
 618-233-1228 **OFFICE**/618-233-1295 **FAX**  
**File path: S drive/Website Materials/Schedules/Class Schedule 2019**