

State of Rhode Island Department of Business Regulation Division of Commercial Licensing Real Estate Section 1511 Pontiac Ave, Bldg. 69-1 Cranston, RI 02920

#### SCHOOL INSTRUCTOR APPLICATION

SECTI	<u>ON 1:</u>
Name:	
Addres	s:
Home l	Phone: Cell:
Email:	
SECTI	<u>ION 2:</u>
School	
Addres	s:
Phone =	#:Fax:
Directo	or: Cell #:
Course	or Courses you will teach:
Please	skip Section 3, if you do not have real estate licensing experience.
SECTI	<u>ION 3:</u>
1.	Do you have an <b>active</b> real estate or appraiser's license:
2.	If you answered <b>yes</b> , what is your license number:
3.	How did you obtain your license, Examination or Reciprocity:
If you a	answered <b>yes</b> to question 1, <b>you do not</b> have to answer 4 & 5.
4.	Have you ever had a real estate or appraisal license:

6.	Has your license ever been <b>suspended or revoked</b> :when:
7.	Please state reason <b>why</b> :
<u>SECT</u>	<u>ION 4:</u>
1.	Your knowledge and qualifications to teach this course, (e.g., areas of expertise, etc.).
Please	explain:
2.	College or University you attended:

5. If yes, from which state: \_\_\_\_\_ dates it was active, from: \_\_\_\_\_ to \_\_\_\_\_

3. Degree: \_\_\_\_\_

## **SECTION 5:**

## **STATEMENT OF APPLICANT**

## I HEREBY AFFIRM THAT ALL ANSWERS ARE TRUE.

Signature of Applicant

# Please note that a current resume is required with this application.

\* All applicants are approved for a three year term.