## **EMPLOYMENT AND EXPERIENCE HISTORY - REAL ESTATE APPRAISERS**

Access this form via website at: hawaii.gov/dcca/pvl

Applicant's Name:

(Print)

## List your employment history for the last five years beginning with your most recent position. Use additional sheets if necessary.

Name of Employer			Major Duties and Responsibilities:
Address			
Phone No.	Date Started	Date Ended	
Job Title		1	

Name of Employer			Major Duties and Responsibilities:
			_
Address			
			_
Phone No.	Date Started	Date Ended	
Job Title			_

Name of Employer			Major Duties and Responsibilities:
Address			
Phone No.	Date Started	Date Ended	-
Job Title			1

## Affidavit of Applicant:

I certify that the statements, answers and representations made in this application and the documents attached are true and correct. I understand that any misrepresentation is grounds for refusal or subsequent revocation of license or certificate and is a misdemeanor (Sections 710-1017 and 436B-19, Hawaii Revised Statutes and Section 16-114-49, Hawaii Administrative Rules).

Signature of Applicant

Date

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.