

REAL ESTATE COMMISSION
State of Hawaii
Professional and Vocational Licensing Division
Department of Commerce and Consumer Affairs
335 Merchant Street, Room 333
Honolulu, Hawaii 96813

FOR OFFICE USE ONLY	
Approved/Date:	Cert. No.:
Denied/Date:	
Cashier's Validation:	

**SUPPLEMENTARY APPLICATION FOR PRELICENSE INDEPENDENT
STUDY COURSE INSTRUCTOR**

☐ CERTIFICATION

☐ RECERTIFICATION

1.	Applicant's Name:	
2.	Business Address:	
3.	Residence Address:	
4.	Business Telephone:	Residence Telephone:
	Email:	

5. **Indicate the certification(s) for which you are applying:**

☐ Salesperson prelicensing curriculum

☐ Broker prelicensing curriculum

6. I will be instructing for _____
Name of school

7. What is the delivery method(s) for the course?

For	Application	\$50	905
Cashier's Use	Service Fee	\$25	BCF
Only			

- Continued on Reverse -

8. List the dates and course titles of classes and training you have completed on the specific method of delivery of this course. **Attach** certificates.

9. List your experience in the delivery method used for this class. **Attach** certificate or other verification, and/or explanation.

Certification of Applicant:

I hereby certify that the statements and answers on this application and accompanying document(s) are true and correct. I understand that any statement false or untrue, or any material misstatement of fact shall constitute grounds for refusal or subsequent revocation of certification.

Signature of Applicant

Print Name