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APPLICATION FOR PRELICENSING REAL ESTATE Read the attached instructions befo Applicants are subject to requirement		APPROVED	Initials/date:		
filing.		DENIED	Exp. Date	Cert. Sent	
Complete and submit with the \$50	ONLY		2,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Submit ORIGINAL only - FAX and P	L USE 0				
Legal Name (First, Middle)	(LAST)	<u>ي</u> 0			•
		BOARD			
Mailing Address (include apt. no., city, s	Letate & zip code)	FOR E			
Email					
CHECK TYPE OF EXAM	Phone No. (days):	Soc	ial Security No:		
SALESPERSON BROKER					
Check your answer and provide inform	nation:				
,	been denied of a prelicensing education ed	nnivale	ency?	□ ves	□NO
If YES, when?		quivaic	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
•	real estate exam?			☐ YES	□no
a. If YES, salesperson or I			at year and mon		
			•		
Check equivalency category under w	hich you are applying and <u>attach</u> REQUIRE	D sup	porting docume	nts. Check <b>ONE</b>	category ONLY.
Active and current out-of-s	tate real estate license. Attach completed	d "Ver	ification of Licer	nse" form.	
Graduates of an accredited Date degree was conferred	law school in the United States. Name o				cripts.
have majored in real estate	or of Science degree graduates of accred e or business. Attach a photocopy of deg al estate or business (salesperson candida	ree or	original certifie		
documents and fees, in sufficient time prior to taking the examination.  I hereby certify that the information misrepresentation is grounds for refus Statutes), and may result in denial of	estibility to read the instructions thorough to be reviewed and, if approved, for a property of the provided on this application and the does all or subsequent revocation and is a mistapplication, denial of license, or revocation ment which is false and untrue or contains	relicen cumen deme on of l	sing education e ats attached are anor (§710-101 icense. I unders	equivalency certi true and correct 7, and §436B-1 tand that it is ur	ficate to be issued  I understand that Hawaii Revised Hawful to file with
Date			Signature	of Applicant	
This material can be made available for individ	luals with special needs. Please		-ig.iaturo		
call the Licensing Branch Manager at (808) 58	86-3000 to submit your request.		laaA	580	\$25
EW_161220				905	\$25 \$25
			22	J	