APPLICATION FOR PRELICENSING EDUCATION EQUIVALENCY - REAL ESTATE Read the attached instructions before completing form. Applicants are subject to requirements, forms and fees in effect at time of filing. Complete and submit with the \$50 application fee.				APPROVED  DENIED	Initials/date:  Exp. Date	Cert. Sent	
Submit <b>ORIGINAL</b> only - FAX and PHO	TOCOPY will not be accepted.						
Legal Name (First, Middle)	(LAST)	VINC BYLCE ACC	OAKD USE				
Mailing Address (include apt. no., city, state & zip code)		a a c c	FOR B				
Email:							
Date of Birth:							
CHECK TYPE OF EXAM	Phone No. (days):	Sc	ocia	Il Security No:			
SALESPERSON BROKER Check your answer and provide informat	ion						
	denied of a prelicensing education equ	ivalency?			☐ YES	□NO	
If YES, when?		•	•••••	••••••			
·	state exam?				YES	NO	
a. If YES, salesperson or broker?		b. What yea	ar a	nd month?			
Check equivalency category under which	n you are applying and <u>attach</u> REQUIRED	Supporting	do	cuments. Check	ONE category ONI	_Y.	
Active and current out-of-sta	te real estate license. Attach completed	"Verification	of	License" form.			
Graduates of an accredited la Date degree was conferred: _	w school in the United States. Name of Attach pho				rtified transcripts.		
	of Science degree graduates of accredit ch a photocopy of degree or original c on candidate only).						
fees, in sufficient time to be reviewed and	tion provided on this application and or subsequent revocation and is a misd license, or revocation of license. I unde	on equivalend d the docun emeanor (§7 erstand that i	cy oner 10- it is	certificate to be is nts attached are 1017, and §436B s unlawful to file	ssued prior to taki true and correc -19, Hawaii Revise	ng the examination. t. I understand that ed Statutes), and may	
Date				Signature of Applicant			
This material can be made available for individual call the Licensing Branch Manager at (808) 586-30	•			<b>3</b>			
EW_170601					580 905 argeBCF	\$25	