## VERIFICATION OF LICENSE FOR CONTINUING EDUCATION EQUIVALENCY -- REAL ESTATE

PART I. TO BE COMPLETED BY	APPLICANT	
C. Upon receipt of	nd this form to out-of-state lice	ensing agency to complete Part II. -of-state agency, applicant to attach completed form to ith the required fee.
Applicant's Name (First, Middle) Mailing Address (include apt. no., city, st	SALESPERSON	
		License Number Date Licensed

<b>PART II. TO BE COMPLETED BY OUT-OF-STATE LICENSING AGENCY</b> The above-named person is applying for a real estate continuing education equivalency in Hawaii. Please supply the following information, and mail this form back to the above-named person.			
SALESPERSON	If no, please explain:		
BROKER			
	2) Has disciplinary action ever been taken against the license?YES NO		
Date Licensed	If yes, please explain:		
	3) Are there any pending disciplinary actions? YES NO		
Expiration Date			
	<ul> <li>4a) Is there a continuing education requirement?</li></ul>		
Name of Out-of-state Agency	Signature Date		
Address of Out-of-state Agency	Name & Title		