

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION

REAL ESTATE INSTRUCTOR APPLICATION

PRE-LICENSING POSTLICENSING CONTINUING EDUCATION

1. Name of Applicant: _____

Mailing Address: _____

City, State, Zip: _____

Business Phone: _____ Fax Number: _____

Applicants E-Mail Address: _____

2. Name and address of school / organization or sponsor for which the applicant will instruct:

3. Title of Course which the applicant will instruct: COURSE NUMBER #: _____

4. PROOF OF QUALIFICATION **MUST** BE ATTACHED to include:

- Detailed resume defining dates (from-to) of schooling and experience. **Describe experience in the field in which applicant is applying to instruct** so that resume clearly indicates how applicant is qualified to teach subject matter of course per [NAC 645.426](#);
- Copies of applicable documents (licenses, certificates, etc).

QUESTIONS 5, 6 AND 7 **MUST** BE ANSWERED BY APPLICANT:

5. Have you ever been refused approval of a license or certificate by any Federal, State, County or City agency?
Yes No **If yes, attach an explanation.**

6. Has any license or certificate held by you been suspended, revoked or subject to discipline?
Yes No **If yes, attach an explanation.**

7. Have you ever been subject to disciplinary action by any Federal, State, County or City agency?
Yes No **If yes, attach an explanation.**

INCOMPLETE SUBMISSION WILL RESULT IN DELAY OF APPLICATION

I declare under penalty of perjury under the laws of the State of Nevada that the foregoing and attached documentation and statements of experience and eligibility are true and correct. If approved, I agree to comply with all applicable laws, regulations, policies and procedures, including the Instructor Standards of Conduct which I have read and understood, and will duly execute upon the grant of this application.

Executed on: _____, 20 _____
(Date)

Ruth Ahlbrand

(Signature of Applicant)

(Printed Name of Applicant)

BROKER CERTIFICATION

I certify that _____, license # _____ has _____
(Instructor Applicant Name)
years of full-time experience as a real estate agent.

(Printed Name of Broker and Brokerage)

(Broker Signature)

(Date)

AND/OR:

SPONSOR CERTIFICATION

I certify that _____, license # _____ has:
(Instructor Applicant Name)

- a bachelor’s degree plus at least 2 years of full time experience in the field in which the applicant will be providing instruction; **or**
- at least 6 years of full time experience in the field in which the applicant will be providing instruction; **or**
- 75 hours of teaching experience in the field in which the applicant will be providing instruction in the 3 years immediately preceding the date of the application plus at least 3 years of full time experience in that field; **or**
- any combination of at least 6 years of college-level course work and full-time experience in the field in which the applicant will be providing instruction.

(Printed Name of Education Sponsor and Signer)

Cain Tapp

(Sponsor Signature)

(Date)

FOR NRED INTERNAL USE ONLY

Date: _____

Approved / Denied By: _____