

CONTINUING EDUCATION COURSE VERIFICATION

RE 251 (Rev. 2/98)

Read reverse side before completing.

NAME - PRINT AS IT APPEARS ON YOUR LICENSE		LICENSE IDENTIFICATION NUMBER	
CORPORATION NAME - <i>if officer printed above</i>		<i>DRE Use Only</i>	RECORD TYPE <input type="checkbox"/> 2
		LICENSE EFFECTIVE DATE	OFFICER ID NUMBER
MAILING ADDRESS			LICENSE TYPE <input type="checkbox"/> B <input type="checkbox"/> O <input type="checkbox"/> S <input type="checkbox"/> C

CERTIFICATE NUMBER <i>(8 or 13 digits)</i>	DATE COMPLETED			COURSE HOURS	EXT <i>DRE Use Only</i>	COURSE TITLE
	Mo.	Day	Yr.			
TOTAL COURSE HOURS						

<p>CERTIFICATION</p> <p><i>I certify under penalty of perjury that I have taken and completed the courses listed above and will furnish to the Department of Real Estate, upon request, evidence of having taken any or all of the courses listed.</i></p>	<p>SIGNATURE OF APPLICANT</p> <p style="text-align: right;">DATE</p>
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