

Real Estate Board
OUT-OF-STATE EXPERIENCE VERIFICATION FORM
Experience Obtained outside of Virginia

- This form must be completed by a **principal broker** or **supervising broker** who can attest to the applicant's real estate sales experience during the required time-period.
- Photocopies of this form may be used to accommodate different brokers who have supervised the applicant during the required time-period.
- Please Note: Applicants **cannot** verify their own experience. Out-of-state licensed broker (or sole proprietorship) applicants reciprocating to Virginia may ask a licensee or attorney to attest to their experience.

Broker Applicants

18 VAC 135-20-40.2 and 18 VAC 135-20-60.7 of the *Real Estate Board Regulations* require applicants for real estate broker licenses to be actively engaged as a real estate salesperson/broker for a period of 36 of the 48 months immediately preceding their application for licensure.

1. Applicant's Name _____
Last First Middle Generation

2. Provide **one** of the following identification numbers.

☐ Social Security Number or ☐ Virginia DMV Control Number *

* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

3. Firm's Name (where experience obtained) _____

4. Firm's Real Estate License Number: _____

5. Firm's Contact Numbers _____
Primary Telephone Alternative Telephone Fax

6. Firm's Principal Broker or Supervising Broker's Name: _____
Last First Middle Generation

7. Verifier: I am completing this experience verification form as a:

☐ Attorney ☐ Licensee from the State of _____. My License Number is _____

8. **Out of State Verifier:**

I, _____,
(Print Name of Verifier)

certify that the above-named applicant has/had been employed by, or associated with, the real estate firm listed above; and has been actively engaged (active licensure with the licensed real estate firm or sole proprietorship in performing those activities defined in §54.1-2100 - §54.1-2101 of the Code of Virginia) for an average of at least 40 hours per week. I also certify that I have direct knowledge of the applicant's activities.

_____ months from _____ to _____ (Complete for each active period)
(Number of Months) (MM/DD/YYYY) (MM/DD/YYYY)

Verifier's Signature _____ Date _____

Verifier's Contact Number _____
Primary Telephone Alternative Telephone Fax