

INSTRUCTIONS FOR COMPLETING THE EXAMINATION REGISTRATION FORM

IMPORTANT NOTE CONCERNING EDUCATION VERIFICATION: First time Broker applicants must provide verification of completion of the required prelicense education. Original or notarized true copies of course transcripts or course completion certificates must be received with your registration form before you will be authorized to take the examination.

1. NAME Print your legal name in the boxes provided, using one box per letter.
2. SOCIAL SECURITY # Please provide your Social Security Number as required by the Maryland Department of Labor. Print only one number per box. (See page 8 for an explanation of use of your Social Security number.)
3. MAILING ADDRESS Print only one letter or number per box. Do not include punctuation marks; leave blank spaces to show spaces. All information will be sent to the address you provide here. Do not use a P.O. box unless it is accompanied by a rural delivery route number. Please include the county.
4. EMAIL ADDRESS Please provide your complete email address. The Commission uses email to communicate with licensees.
5. TELEPHONE # Please provide both home and office phone numbers (including area codes).
6. BIRTH DATE / BIRTH PLACE Please provide your date of birth (e.g., "06-01-50" for June 1, 1950). Please provide the city and state of your birth.
7. EXAMINATION Place an "X" in the box indicating the examination for which you are registering. Then, indicate whether you are taking this examination for the first time (by placing an "X" in the appropriate box). Broker applicants, indicate whether you are applying for an Associate Broker or Broker.
8. STATE REGISTRATON NUMBER If this is your initial Broker application, leave this blank. If you currently hold, or held, an active Maryland real estate license, enter the Category Number (Salesperson (05), Associate Broker (03), Broker (01)) and Registration Number. If you have any questions about your status or your original category or registration number, call the Maryland Real Estate Commission at (410) 230-6230.
9. EXAMINATION PORTION Place an "X" in the box indicating which portion(s) of the examination you are registering to take. You must pass both portions of the examination to qualify for licensure.

If you are registering to take only one portion of the examination, indicate the circumstances in the boxed area.
10. EDUCATION VERIFICATION First time Broker applicants must provide verification of completion of the required prelicense education. Original or notarized true copies of course transcripts or course completion certificates must be received with your registration form before you will be authorized to take the examination. Place an "X" in the appropriate box(es).
11. FEES The examination fee is \$61.00. Fees are not refundable and are not transferable.
12. RELEASE Check the "Yes" box if you authorize PSI to release your name, address, and pass result to real estate schools, brokers, or other interested parties. Check "No" if you do not want this information released.
13. EXPERIENCE All Broker and Associate Broker candidates must attach a Certification of Licensure issued by the Maryland Real Estate Commission verifying 3 current years of active licensure immediately preceding application. License also must be in good standing. Purchase the certification at <http://www.dlir.state.md.us/cgi-bin/electroniclicensing/re/certification/recertification1.cgi>. A license history must be dated within 90 days of submission to PSI. If you delay in testing or re-testing, an updated history may be needed. Branch Office Manager candidates applying under 17-518 must contact the Maryland Real Estate Commission for approval to register for the Broker examination.
14. REQUIRED INFORMATION All candidates must answer questions A through H by indicating either "yes" or "no" with an "X."
15. EXAM ACCOMMODATIONS Applicants with disabilities or those who would otherwise have difficulty taking the examination must follow the instructions on the form at the end of this Candidate Information Bulletin.
16. AFFIDAVIT AND SIGNATURE All applicants are required to read the affidavit, then sign and date the application as on a check or legal document. The application is not complete and will not be accepted if it is submitted without your signature.





MARYLAND REAL ESTATE LICENSING EXAMINATION SALESPERSON AND BROKER REGISTRATION FORM

Before you begin. . .

Be sure to follow the attached instructions while filling out this registration form. For Broker Applicants, you must provide all information requested, enclosed attachments as applicable, and send the original or notarized true copy of the certification of completion of education and the appropriate fees. PLEASE TYPE OR PRINT LEGIBLY. Registration forms that are incomplete, illegible, or not accompanied by the proper fee will be returned unprocessed.

BE SURE TO COMPLETE BOTH PAGES OF THIS REGISTRATION FORM AND SIGN THE FORM IN ITEM 16 BEFORE MAILING.

1. Legal Last Name:

Last Name
Generation
(e.g., Jr., III)
- Legal First Name:

First Name
M.I.
2. Social Security: - - (REQUIRED)
3. Mailing Address:

Number, Street
Apt. No.

-

City
State
Zip Code

County
4. Email Address: _____@_____ (REQUIRED)
5. Telephone: Home - - Office - -
6. Birth Date: - - Birth Place

M M D D Y Y
City State
7. Examination: (Check one) Salesperson Broker* Is this the first time you are testing Yes No

*Broker applicants: My license application will be Broker Associate Broker
8. State Reg. No.: To be assigned by PSI or Maryland Real Estate Commission.

Category
Registration No.
9. Examination Portion: (Check one) Both Portions State Portion Only** National Portion Only**
10. Educational Verification for Broker Candidates:

A. I am enclosing the original or notarized true copies of Maryland course transcripts or course completion Y No

OR

B. I am enclosing the original Letter of Qualification issued by the Maryland Real Estate Commission. Y No

Letter of Qualification (waivers), reciprocity and reinstatement candidates for Broker and Salesperson Candidates

A. I am enclosing the original Letter of Qualification issued by the Maryland Real Estate Commission. Y No

Please continue on the next page.



11. Fees: Examination Fee (\$61)

If paying by credit card, check one: VISA MasterCard American Express Discover

Card No: _____ Exp. Date: _____

Card Verification No: _____ *The card verification number may be located on the back of the card (the last three digits on the signature strip) or on the front of the card (the four digits to the right and above the card account number).*

Billing Street Address: _____ Billing Zip Code: _____

Cardholder Name(Print): _____ Signature: _____

12. Release:

I give my permission for my name, address, and pass result to be released to real estate schools, brokers, or other interested parties who request them. Yes No

13. **BROKER and ASSOCIATE BROKER candidates:** attach a Certification of Licensure issued by the Maryland Real Estate Commission verifying 3 current years of active licensure immediately preceding application. License also must be in good standing. Purchase the certification at <http://www.dllr.state.md.us/cgi-bin/electroniclicensing/re/certification/recertification1.cgi>. A license history must be dated within 90 days of submission to PSI. If you delay in testing or re-testing, an updated history may be needed.

BRANCH OFFICE MANAGER candidates applying under 17-518 must contact the Maryland Real Estate Commission for approval to register for the Broker examination.

14. ALL candidates must complete the following questions by answering "YES" or "NO" to each:	YES	NO
A. I am 18 years of age or older	<input type="checkbox"/>	<input type="checkbox"/>
B. Are you now or have you ever been licensed as a real estate broker or salesperson in any other state?	<input type="checkbox"/>	<input type="checkbox"/>
C. My prelicense education was obtained in a jurisdiction other than Maryland.	<input type="checkbox"/>	<input type="checkbox"/>
D. Are you licensed to practice law in Maryland?	<input type="checkbox"/>	<input type="checkbox"/>
E. Have you ever had a license denied, suspended, revoked, or subjected to a disciplinary action in Maryland or any other jurisdiction (other than motor vehicle)?	<input type="checkbox"/>	<input type="checkbox"/>
F. Have you ever been convicted of a felony or a misdemeanor in any State, Military, or Federal Court?	<input type="checkbox"/>	<input type="checkbox"/>
G. Have you ever been found to have violated the fair housing laws of any jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
H. Did you hold a previous Real Estate license in Maryland under your current or former name?	<input type="checkbox"/>	<input type="checkbox"/>

If Yes, provide name _____, and former registration number _____

(If you previously held a license under a different name, please send a photo copy of your legal name change document with this registration to PSI.)

15. **Affidavit/Signature:** I HEREBY IRREVOCABLY CONSENT that, if the address of this registration is not within the state of Maryland, (i) service of process on the Executive Director of the Maryland Real Estate Commission shall bind me in any action, suit or proceeding brought against me, and (ii) an action, suit or proceeding may be brought against me in any county in which the cause of action arose or I reside.

I hereby certify that the information provide on both sides of this registration is true and correct and the Maryland Real Estate Commission may rely on its truthfulness in considering this registration, and that this registration is signed and affirmed to under penalty of perjury. Further, I understand that Maryland real estate licenses expire every 2 years and I will be required to renew this license and pay the renewal fee prior to the expiration of the license. I have read and understand the Candidate Information Bulletin and the Registration form.

Sign here: _____

Signature of Candidate

Date

You must mail this registration form, along with the Original Letter of Qualification or prelicense education verification, with your examination fee to:

PSI attn: Examination Registration MD RE
3210 E Tropicana, Las Vegas, NV 89121

