

VERMONT SECRETARY OF STATE  
VERMONT REAL ESTATE COMMISSION  
(802)828-3228

**APPLICATION FOR INDIVIDUAL REQUEST FOR RELICENSING CREDIT**

AS PROVIDED BY BOARD RULE, YOU MAY, AS A PROGRAM PARTICIPANT, REQUEST REVIEW OF A REAL ESTATE RELATED PROGRAM FOR CONTINUING EDUCATION CREDIT. THE COMMISSION WILL REVIEW YOUR REQUEST PROVIDED THIS APPLICATION IS COMPLETED AND ALL REQUESTED ENCLOSURES ARE ATTACHED. YOU WILL BE NOTIFIED IN WRITING OF THE COMMISSION'S DECISION.

APPLICANT'S NAME: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

PROGRAM COORDINATOR OR SPONSOR: \_\_\_\_\_

**PROGRAM DETAILS**

PROGRAM TITLE: \_\_\_\_\_

TOTAL # OF CLOCK HOURS: \_\_\_\_\_ PROGRAM BEGINS: \_\_\_\_\_ PROGRAM CONCLUDES: \_\_\_\_\_

1. LIST NUMBER OF PRGRAM TOPICS:
2. LIST NUMBER OF CLOCK HOURS FOR EACH TOPIC:

INSTRUCTOR: \_\_\_\_\_

METHOD OF INSTRUCTION: \_\_\_\_\_

**ENCLOSURES NEEDED:** (APPLICATION WILL BE INCOMPLETE WITHOUT THE REQUESTED ENCLOSURES.)

1. COURSE OUTLINE
2. BACKGROUND INFORMATION OF INSTRUCTORS
3. SAMPLE OF ANY ADVERTISING USED FOR PROMOTIONAL PURPOSES
4. PROOF OF COMPLETION )IF CERTIFICATE OF COMPLETION IS NOT FURNISHED BY THE COURSE COORDINATOR OR INSTRUCTOR A LETTER FORM THE INSTRUCTION WILL SUFFICE.)
5. BRIEF EXPLANATION FROM YOU AS TO HOW THIS COURSE FULFILLS THE REQUIREMENTS OF TITLE 26 V.S.A. CHAPTER 41.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**IMPORTANT - PLEASE NOTE:**

**ALONG WITH THE ORIGINAL YOU MUST SUBMIT FIVE (5) COPIES (SIX (6) IN TOTAL) OF THE APPLICATION AND PROGRAM INFORMATION TO BE REVIEWED BY EACH OF THE COMMITTEE MEMBERS - THIS SHOULD BE SUBMITTED AT LEAST FORTY FIVE (45) DAYS PRIOR TO THE DESIRED EFFECTIVE DATE OF APPROVAL**

**SEND COMPLETED APPLICATION TO:**

**VERMONT SECRETARY OF STATE  
VERMONT REAL ESTATE COMMISSION  
National Life Building North FL 2  
Montpelier, VT 05620-3402**