

**SALESPERSON EXAM/LICENSE APPLICATION**

RE 435 (Rev. 6/09)

DRE RECEIVED DATE

DRE USE ONLY

**GENERAL INFORMATION**

- Apply for the real estate salesperson examination *and* the real estate salesperson license at the same time, OR
- Apply for a real estate salesperson license, if a valid examination application has been filed within the last two years.

**Read enclosed instructions (RE 435A) before** completing and submitting this application to ensure that you understand the requirements and that the proper qualifying documentation and exam/license fee are submitted. **Note: Fees submitted with this application are not refundable.** If you fail to qualify for or pass the examination within two years of the date this application is filed, the fees may not be applied to any future applications.

EXAM ID

LIC. ID

DRE USE ONLY

EFFECTIVE DATE

EXPIRATION DATE

DATE EXAM PASSED

**APPLICATION IS FOR: (Must check one box.)**

- C**  **Real estate examination AND license** – Complete Parts A, B, C, & D.  
**L**  **Real estate license ONLY** (If already scheduled for examination) – Complete Parts A, C & D.

**FEES REQUIRED**

Exam ..... \$ 60  
 License..... \$245  
**Total due to DRE with this application.. \$305**

**PART A — APPLICANT INFORMATION**

1. SOCIAL SECURITY NUMBER (REQUIRED – REFER TO PRIVACY NOTICE ON RE 435A.) \*\*      2. BIRTH DATE (MM/DD/YYYY) \*\*

3. Have you **ever** applied for a California real estate exam? .....  NO     YES  
 If YES, list examination ID#. (If known.)..... \_\_\_\_\_

4. APPLICANT'S NAME – LAST, FIRST, MIDDLE \_\_\_\_\_

5A. MAILING ADDRESS – STREET ADDRESS OR POST OFFICE BOX \_\_\_\_\_

5B. CITY \_\_\_\_\_      5C. STATE \_\_\_\_\_      5D. ZIP CODE \_\_\_\_\_

6. Do you reside in California? .....  NO     YES  
 If NO, an "RE 234" is required. (Refer to RE 435A, General Examination Information.)

7. RESIDENCE PHONE NUMBER (INCLUDE AREA CODE) \_\_\_\_\_      8. BUSINESS (DAYTIME) PHONE NUMBER (INCLUDE AREA CODE) \_\_\_\_\_

9. HAVE YOU USED ANY OTHER NAMES (I.E., MAIDEN NAME, FORMER MARRIED NAMES, AKA'S, ETC.)?  
 NO     YES    IF YES, LIST ALL NAMES USED. \_\_\_\_\_

10. HEIGHT \_\_\_\_\_      11. WEIGHT \_\_\_\_\_      12. COLOR OF EYES \_\_\_\_\_      13. COLOR OF HAIR \_\_\_\_\_      14. GENDER  
 MALE     FEMALE

15. Do you now hold or have you **ever** held a California real estate license? .....  NO     YES  
**If YES, complete 15A, B, C, and D below.**  
 If YES to 15, has your California real estate license been previously revoked? .....  NO     YES

A. TYPE OF LICENSE \_\_\_\_\_      B. IDENTIFICATION NUMBER \_\_\_\_\_      C. EXPIRATION DATE \_\_\_\_\_      D. NAME ON LICENSE \_\_\_\_\_

**PART B — EXAMINATION INFORMATION**

1. When you are qualified for the examination would you prefer to use  YES – Please notify me by mail when I am qualified for the examination. *eLicensing* to schedule your own examination date?       NO – Proceed to item 2.

2. EXAM AREA PREFERENCE (REFER TO DRE.CA.GOV FOR LIST OF OTHER TESTING FACILITIES THAT MAY BE AVAILABLE.)  
 SACRAMENTO     FRESNO     LOS ANGELES     OAKLAND     SAN DIEGO     OTHER: \_\_\_\_\_

3. EARLIEST DATE YOU CAN TAKE EXAM  
 (mm)      (dd)      (yyyy)

4. REQUEST FOR REASONABLE ACCOMODATION  
 I am requesting reasonable accomodation; RE 413 & supporting documents are attached.

**FOR OFFICE USE ONLY**

<input type="checkbox"/> RESTRICTED <input type="checkbox"/> VIOLATIONS	FORM LETTER / NOTES	EXAM PROCESSOR	DATE PROCESSED
	SENDER/DATE SENT	LICENSE PROCESSOR	DATE PROCESSED

\*\* Your social security number and date of birth are required for identification purposes if you elect to schedule your own examination using *eLicensing*.

➔ ➔	NAME OF APPLICANT
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**PART C — LICENSE INFORMATION**

1. INITIAL WORKING STATUS (Check one.)  
 I **WILL BE** WORKING IN REAL ESTATE FOR WHICH A CALIFORNIA LICENSE IS REQUIRED. ITEMS 2-8 MUST BE COMPLETED.       I **WILL NOT** BE WORKING IN REAL ESTATE FOR WHICH A CALIFORNIA LICENSE IS REQUIRED. **DO NOT COMPLETE ITEMS 2-8; GO TO PART D.**

2. BROKER OR CORPORATION ID #	DRE USE ONLY	3. BROKER/CORP. EXPIRATION DATE	4. BUSINESS TELEPHONE NUMBER
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5. SPONSORING BROKER OR CORPORATION (Print name as it appears on license – Do not list DBA's.)

6. MAIN OFFICE ADDRESS OF SPONSORING BROKER OR CORPORATION

**Broker Certification**

I hereby certify under penalty of perjury that I am a licensed real estate broker, and that I have read the applicant's answers to all questions in the application, and that upon the applicant being issued the license there will be a written agreement on file in my office covering the material aspects of employment relationship including supervision, duties, and compensation of the applicant named on this form under the employment provisions of Section 2726 of the Regulations of the Real Estate Commissioner.

I am aware of the provisions of Section 3700 of the Labor Code which requires every employer to be insured against liability for workers' compensation.

7. SIGNATURE (Sponsoring Broker/Licensed Officer)	DATE	8. PRINTED NAME OF LICENSED OFFICER (If corporation on line 5.)
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**PART D — BACKGROUND INFORMATION**

Carefully read and provide detailed answers to questions 1-4. You must provide a "yes" or "no" response to all questions, and also completely and accurately provide the detailed information required in item(s) 5 and 6 below. Attach additional sheets if you need more space. Each additional sheet must be signed by the applicant and employing broker. Failure to disclose pertinent information may result in denial of your license application and/or delays.

1. HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY? **CONVICTIONS EXPUNGED UNDER PENAL CODE SECTION 1203.4 MUST BE DISCLOSED. HOWEVER, YOU MAY OMIT TRAFFIC CITATIONS WHICH DO NOT CONSTITUTE A MISDEMEANOR OR FELONY. IF YES, COMPLETE ITEM 5** .....  YES     NO

2. ARE THERE CRIMINAL CHARGES PENDING AGAINST YOU AT THIS TIME? **IF YES, COMPLETE ITEM 5**.....  YES     NO

3. HAVE YOU EVER HAD A DENIED, SUSPENDED, RESTRICTED OR REVOKED BUSINESS OR PROFESSIONAL LICENSE (INCLUDING REAL ESTATE), IN CALIFORNIA OR ANY OTHER STATE? **IF YES, COMPLETE ITEM 6**.....  YES     NO

4. ARE THERE ANY LICENSE DISCIPLINARY ACTIONS PENDING AGAINST A BUSINESS OR PROFESSIONAL LICENSE YOU HOLD AT THIS TIME? .....  YES     NO  
**IF YES, COMPLETE ITEM 6.**

**CONVICTION DETAILS**

"Convicted" as used in Item 1 includes a verdict of guilty by judge or jury, a plea of guilty, a plea of nolo contendere (i.e., "no contest"), or a forfeiture of bail in the courts (including military courts) of any state, commonwealth, possession or country. All convictions must be disclosed, no matter how long ago they occurred, even if the plea or verdict was set aside, the conviction dismissed or expunged, or you have been pardoned. Convictions occurring while you were a minor (under 18 years of age) must be disclosed unless the record of the conviction has been sealed under Section 1203.45 of the California Penal Code or Section 781 of the California Welfare and Institutions Code.

5. **DETAILED EXPLANATION OF ITEM 1 AND/OR 2.**  
 COMPLETE ONE LINE FOR EACH VIOLATION AND PROVIDE EXPLANATION BELOW. IF YOU ARE UNABLE TO PROVIDE THIS INFORMATION, PROVIDE ALL THE REQUESTED INFORMATION YOU CAN OBTAIN, WITH AN EXPLANATION FOR THE MISSING INFORMATION. IF THE CONVICTION STATUS HAS BEEN SUBSEQUENTLY CHANGED OR REDUCED, NOTE THAT FACT IN THE AREA PROVIDED FOR ADDITIONAL INFORMATION.

ATTACHMENTS FOR ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. **EACH ADDITIONAL SHEET MUST BE SIGNED BY APPLICANT.**  
 \* CODE SECTION VIOLATED (i.e., 1014, 484, ETC.)  
 \*\* CODE VIOLATED (i.e., U.S. CODE, PENAL CODE, ETC.)  
 \*\*\* DISPOSITION (i.e., PROBATION, PAROLE, FINE, LENGTH OF TERM, etc.)

COURT OF CONVICTION (Name and Address)	ARRESTING AGENCY (Name and Address)	DATE OF CONVICTION	TYPE OF CONVICTION	* CODE SECTION VIOLATED	** CODE VIOLATED	*** DISPOSITION	CASE NUMBER
<b>Example:</b> Sacramento Cnty. 456 Main St., Sac	Sacramento City Police 123 Main St., Sac	2/20/87	<input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor	484	Penal Code	6 months probation and \$200 fine	1234
5A.			<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor				
5B.			<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor				
5C.			<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor				
5D.			<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor				

6. **DETAILED EXPLANATION OF ITEM 3 AND/OR 4. IF NEEDED, EXPLANATION MAY BE PROVIDED BELOW.**

6A. TYPE OF LICENSE	6B. LICENSE ID NO.	6C. LICENSE EXPIRATION DATE	6D. STATE
6E. ACTION (revoked, etc.)	6F. DATE OF ACTION	6G. DATE ACTION TERMINATED	6H. CODE SECTION VIOLATED



NAME OF APPLICANT

**PART D — BACKGROUND INFORMATION (Continued)**

7. ADDITIONAL INFORMATION: Specify the conviction to which your explanation is referring. (Attach extra sheets if more room is needed. **Each additional sheet must be signed by applicant and employing broker, if any.**)

Lined area for providing additional information.

**Salesperson Exam & License Certification**

**Exam** — I hereby certify under penalty of perjury that I am aware of and meet all examination requirements as set forth in RE 435A. I also understand that the fee remitted will not be refunded under any circumstances (Section 10207 of the B&P Code). I understand that subverting the examination will subject me to the penalties of Section 123 of the B&P Code.

**License** — I certify under penalty of perjury under the laws of the State of California that the foregoing answers and statements given in this application are true and correct, that at the time of license issuance I will be 18 years of age or older, that if licensed I will not violate any provisions of the Real Estate Law nor abuse the privileges of a real estate license. I understand that the Department of Real Estate cannot refund the fees submitted with this application, if I fail to qualify for the license for any reason or withdraw this application.

I understand that it is my obligation to notify the Department in writing of any convictions of law that occur subsequent to my filing this application.

8. SIGNATURE OF APPLICANT

9. DATE

