

State of Florida
Department of Business and Professional Regulation
Florida Real Estate Commission
Application for Sales Associate License
Form # DBPR RE 1

APPLICATION CHECKLIST - IMPORTANT - Submit all items on the checklist below with your application to ensure faster processing.

ALL License Applicants must submit:

Fee:

- \$83.75.
- Make check payable to the Florida Department of Business and Professional Regulation.

Electronic fingerprints. See Section (e) of Requirements.

Supporting legal documentation, if necessary. See Section 2)d)i-iv) of Instructions.

Sales Associate License Applicants must:

Present their pre-licensure course certificate to the exam vendor at the time of examination.

Applicants wishing to claim the pre-licensure course exemption through a four year real estate degree must submit official certified transcripts.

Mutual Recognition Applicants must submit:

Submit a certification of license history from the state you are claiming mutual recognition from.

Please mail your completed application, documentation and required fee(s) to:

Department of Business and Professional Regulation
2601 Blair Stone Road
Tallahassee, FL 32399-0783

State of Florida
Department of Business and Professional Regulation
Florida Real Estate Commission
Application for Sales Associate License
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If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at **850.487.1395**.
For additional information see Instructions at the end of this application.

Section I – Application Type

| CHECK ONE OF THE APPLICATION TYPES |
|--|
| <p>Sales Associate License:</p> <p><input type="checkbox"/> Initial Sales Associate (Complete All Sections) [2501/1010]</p> <p><input type="checkbox"/> Mutual Recognition (Complete All Sections) [2501/1011]</p> <p style="padding-left: 20px;">• From what state are you requesting? _____</p> |

Section II – Applicant Personal Information

Note: Applicants must provide at least one physical address

| PERSONAL INFORMATION | | | |
|---|-------|---|------------------------|
| Social Security Number* | | | |
| FULL LEGAL NAME | | | |
| Last/Surname | First | Middle | Suffix |
| Birth Date (MM/DD/YYYY) / / | | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| MAILING ADDRESS | | | |
| Street Address or P.O. Box | | | |
| | | | |
| City | | State | Zip Code (+4 optional) |
| County (if Florida address) | | Country | |
| CONTACT INFORMATION | | | |
| Primary Phone Number | | Primary E-Mail Address | |
| RESIDENCE ADDRESS (IF DIFFERENT THAN MAILING ADDRESS) | | | |
| Street Address | | | |
| | | | |
| City | | State | Zip Code (+4 optional) |
| County (if Florida address) | | Country | |
| ADDITIONAL CONTACT INFORMATION (OPTIONAL) | | | |
| Alternate Phone Number | | Fax Number | |
| Alternate Email Address | | | |

*Under the Federal Privacy Act, disclosure of Social Security numbers is voluntary unless specifically required by federal statute. In this instance, Social Security numbers are mandatory pursuant to Title 42 United States Code, Sections 653, 654, and 666(a); and Sections 455.203(9), 409.2577, and 409.2598, Florida Statutes. Social Security numbers must be recorded on all professional and occupational license applications and will be used to allow efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations.

Section II – Applicant Personal Information - continued

| CURRENT/PRIOR LICENSE INFORMATION | | | |
|---|-------|--------------------|------------------|
| If you currently hold or have previously held a business or professional license/registration in Florida or elsewhere, please list them below (attach additional copies if necessary): | | | |
| 1. License/Registration Type | State | Date (From) / / | Date (To) / / |
| License Number | | Name Used | |
| 2. License/Registration Type | State | Date (From) / / | Date (To) / / |
| License Number | | Name Used | |
| 3. License/Registration Type | State | Date (From) / / | Date (To) / / |
| License Number | | Name Used | |
| PRIOR NAME INFORMATION | | | |
| Have you used, been known as, or been called by another name (e.g., maiden name or nickname) or alias other than the name signed to the application? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If your answer is yes, state name or names used below: | | | |
| Last/Surname | First | Middle | Suffix |
| Last/Surname | First | Middle | Suffix |
| Last/Surname | First | Middle | Suffix |

Section III – Important Testing Considerations and Accommodations

| TESTING CONSIDERATIONS |
|--|
| Are you a high school graduate or the holder of an equivalency certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you hold a four year degree in Real Estate from an accredited institution of higher education? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If so, you are exempt from taking the pre-licensure course. Official certified transcripts must be submitted to meet this exemption. |
| Are you an active member in good standing with the Florida Bar? <input type="checkbox"/> Yes <input type="checkbox"/> No FL Bar No.: _____ |
| If so, you are exempt from taking the pre-licensure course. |
| SPECIAL ACCOMMODATIONS FOR TESTING |
| If you wish to take your examination in Spanish you must make this request when scheduling your exam with the Computer Testing Vendor. |
| Americans with Disabilities Act (ADA) and Disability Accommodation. In accordance with Chapter 61-11.008, Florida Administrative Code, if you have a disability and you need special assistance with the examination process please call the Bureau of Education and Testing at (850)487-9755 immediately. |

Section IV (a) – Background Questions

| BACKGROUND QUESTIONS | | | |
|-----------------------------|--|-----------------------------|---|
| 1. | <input type="checkbox"/> Yes (If yes, please complete Section IV (b)) | <input type="checkbox"/> No | Have you ever been convicted or found guilty of, or entered a plea of nolo contendere or guilty to, regardless of adjudication, a crime in any jurisdiction, or are you currently under criminal investigation? This question applies to any criminal violation of the laws of any municipality, county, state or nation, including felony, misdemeanor and traffic offenses (but not parking, speeding, inspection, or traffic signal violations), without regard to whether you were placed on probation, had adjudication withheld, were paroled, or pardoned. If you intend to answer "NO" because you believe those records have been expunged or sealed by court order pursuant to Section 943.0585 or 943.059, Florida Statutes, or applicable law of another state, you are responsible for verifying the expungement or sealing prior to answering "NO." YOUR ANSWER TO THIS QUESTION MAY BE CHECKED AGAINST LOCAL, STATE AND FEDERAL RECORDS. FAILURE TO ANSWER THIS QUESTION ACCURATELY MAY RESULT IN THE DENIAL OR REVOCATION OF YOUR LICENSE. IF YOU DO NOT FULLY UNDERSTAND THIS QUESTION, CONSULT WITH AN ATTORNEY OR CONTACT THE DEPARTMENT. |
| 2. | <input type="checkbox"/> Yes (If yes, please complete Section IV (c)) | <input type="checkbox"/> No | Has any judgment or decree of a court been entered against you in this or any other state, province, district, territory, possession or nation, related to the practice or profession for which you are applying, or is there any such case or investigation pending? |
| 3. | <input type="checkbox"/> Yes (If yes, please complete Section IV (c)) | <input type="checkbox"/> No | Have you ever had an application for registration, certification, or licensure in Florida or in any other jurisdiction denied, or is there now pending a proceeding or investigation to deny such an application? |
| 4. | <input type="checkbox"/> Yes (If yes, please complete Section IV (c)) | <input type="checkbox"/> No | Has any license, registration, or permit to practice any regulated profession, occupation, vocation, or business been revoked, annulled, suspended, relinquished, surrendered, or otherwise disciplined in Florida or in any other jurisdiction, or is any such proceeding or investigation now pending? |

If you answered "YES" to any question in questions 1 – 4 above, please refer to Section IV of Instructions for detailed instructions on providing complete explanations, including requirements for submitting supporting legal documents. Please complete Section IV (b) for your response to question 1, and complete Section IV (c) for your response to questions 2, 3 and 4. If you have more offenses to document in Section IV (b), attach additional pages as necessary.

Section IV (b) – Explanation(s) for Background Question 1

| EXPLANATION | |
|-------------------------------------|--|
| Offense | |
| County | State |
| Penalty/Disposition | |
| Date of Offense (MM/DD/YYYY) / / | Have all sanctions been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Description | |
| | |
| | |

Section IV (b) – Explanation(s) for Background Question 1 – continued

| EXPLANATION | |
|-------------------------------------|--|
| Offense | |
| County | State |
| Penalty/Disposition | |
| Date of Offense (MM/DD/YYYY) / / | Have all sanctions been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Description | |
| | |
| | |

| EXPLANATION | |
|-------------------------------------|--|
| Offense | |
| County | State |
| Penalty/Disposition | |
| Date of Offense (MM/DD/YYYY) / / | Have all sanctions been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Description | |
| | |
| | |

Section IV (c) – Explanation(s) for Background Questions 2, 3 and 4

| EXPLANATION | |
|---------------------|----------------------------------|
| State/Jurisdiction: | Application Type/License Number: |
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Section IV (c) – Explanation(s) for Background Questions 2, 3 and 4– continued

| EXPLANATION | |
|---------------------|----------------------------------|
| State/Jurisdiction: | Application Type/License Number: |
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Section V – Affirmation by Written Declaration

| AFFIRMATION BY WRITTEN DECLARATION | |
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| <p>I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.</p> | |
| Signature: | Date: |
| Print Name: | |

Instructions

If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at **850.487.1395**.

1) Requirements for Real Estate Sales Associate License

- a) Applicant must be at least 18 years old.
- b) Applicant must possess a high school diploma or its equivalent.
- c) Applicant must possess a Social Security number to apply.
- d) Applicant must pass the sales associate exam given by the State of Florida.
 - i) In order to qualify for the state sales associate exam an applicant must:
 - (1) Satisfy the pre-licensure education requirements.
 - (2) Exemptions to the pre-licensure education requirements:
 - (a) **Note:** Attorneys in good standing with the Florida Bar are exempt from the 63-hour sales associate pre-licensure course. Such attorneys seeking licensure as a sales associate should be certain to include their Florida Bar license number and information in Section III of this application.
 - (b) **Note:** An applicant who holds a four-year degree in real estate, from an accredited institution of higher education, is exempted from the 63-hour sales associate pre-licensure course. Applicants wishing to claim this exemption should have the relevant educational institution submit official transcripts demonstrating the applicant meets the qualifications for exemption.
 - (c) See Department of Business and Professional Regulation Ask us icon on the website for more information.
 - (3) Submit to the exam vendor, at the time of examination, the course completion report. See Rule 61J2-3.015 of the Florida Administrative Code, <https://www.flrules.org/gateway/ruleNo.asp?id=61J2-3.015>, for more information.
 - (4) Submit admissions authorization letter (from the Department's testing vendor) at the time of examination. See section 3 (a) (ii) of instructions for more information.
 - (5) Submit proof of identification at the time of the examination.
- e) Applicant must submit electronic fingerprints.
 - i) Pursuant to Chapter 475, Florida Statutes, electronic fingerprinting is mandatory for all real estate sales associate, real estate broker, and real estate appraiser applicants. Electronic fingerprinting allows applicants to have their fingerprints scanned and electronically submitted to the Florida Department of Law Enforcement (FDLE) and Federal Bureau of Investigation (FBI).
 - ii) Electronic Fingerprinting is located at various convenient sites throughout the state. See <http://www.asisvcs.com/indhome.asp?CPCat=FP10STATEREG> for more information.

2) General Information and Application Instructions by section

- a) **Section I- Application Type**
 - i) Select only one of the application types.
 - ii) Check Mutual Recognition if you have a real estate license in one of the states the department has Mutual Recognition with and enter the name of the state that you are licensed in.
 - (a) See <http://www.myfloridalicense.com/dbpr/re/MutualRecognition.html> for more information on mutual recognition.
 - (b) A current certification of license history from the state you are claiming as the mutual recognition state is required. The history must contain your initial license exam type, current license status, disciplinary information, and how many active months of licensure the applicant has within the preceding five years.
- b) **Section II- Applicant Personal Information**
 - i) Fill out each section completely. A Social Security number is required in order to apply for any individual license within the Department of Business and Professional Regulation.
 - ii) In the Full Legal Name section, applicants must use the name as it appears on his or her Social Security card. Do not use any nicknames, aliases, or initials.
 - iii) Provide your mailing address. This will be used for sending correspondence regarding your application and license.
 - iv) Provide a valid phone number and email address. Contact information is often used to quickly resolve questions with applications by telephone call or email. If contact information is not

provided, questions regarding applications will be mailed to the applicant's mailing address and may take longer to resolve.

- v) Applicants are required to provide at least one physical address – i.e., not a P.O. Box. If the mailing address is not also your physical address, please provide a physical address.
 - vi) Additional contact information is optional and will be used when the applicant cannot be reached using their primary contact information.
 - vii) Applicants must provide information on current or prior licenses held in Florida or any other state, territory, or jurisdiction of the United States or in any foreign national jurisdiction.
 - viii) Applicants must provide information on any prior names or aliases used by applicant. If the name on supporting documentation does not match the applicant's legal name, the alias used in the supporting documentation must be provided in this section. Failure to do so will result in a deficient application.
- c) **Section III- Important Testing Considerations and Accommodations**
- i) To obtain a real estate license in Florida, you must be a high school graduate or have an equivalency (GED).
 - ii) If you have a four (4) year degree in real estate from an accredited institution, you must submit an official certified transcript.
 - iii) If you are an attorney and an active member of the Florida Bar, please provide your Florida bar number.
 - iv) If you wish to take the examination in Spanish, see <http://www.myfloridalicense.com/dbpr/servop/testing/index.html> for more information.
 - v) **NOTE:** If you have a disability and require special accommodations in taking this examination, please contact the Bureau of Education and Testing at 850.487.9755. You must submit a "Request for Special Accommodations" application along with your application. If accommodations are not requested in advance, we cannot guarantee the availability of accommodations. For more information see <http://www.myflorida.com/dbpr/servop/testing/ADA.html>.
- d) **Section IV (a), (b), and (c) - Background Questions.**
- i) Question 1:
 - (1) If you answer "yes" to this question, you must complete Section IV (b) [*make additional copies as necessary*] of the application and provide a copy of the arrest report, copies of the disposition or final order(s), and documentation proving all sanctions have been served and satisfied. **You must supply this documentation for each occurrence.** If you are unable to supply this documentation, a certified statement from the clerk of court for the relevant jurisdiction stating the status of records is required.
 - (2) If you are still on probation, you must supply a letter from your probation officer, on official letterhead, stating the status of your probation.
 - ii) Question 2:
 - (1) If you answer "yes" to this question, you must complete Section IV (c) [*make additional copies as necessary*] of the application and provide a copy of the judgment or decree. You must also supply documentation proving all sanctions have been served and satisfied, or if not, stating the current status of any proceedings.
 - iii) Question 3:
 - (1) If you answer "yes" to this question, you must complete Section IV (c) [*make additional copies as necessary*] of the application and supply copies of documentation explaining the denial or pending action.
 - iv) Question 4:
 - (1) If you answer "yes" to this question, you must complete Section IV (c) [*make additional copies as necessary*] of the application and supply copies of the order(s) showing the disciplinary action taken against the license, or documentation showing the status of the pending action.
- e) **Section V Affirmation by Written Declaration**
- i) The applicant must sign the affirmation by written declaration.
- 3) **Other Information**
- a) Testing Information
 - i) An applicant will be notified when approved for the examination, and must appear for examination within two years from the date the application was received by the Department of Business and Professional Regulation (DBPR).
 - ii) The testing vendor will be notified, by DBPR, once the application has been approved. The testing vendor will contact the applicant with the required testing administration information. The applicant will receive an admissions authorization letter.

- iii) The examination fee will be paid separately by the applicant to the testing vendor.
- iv) After passing the exam, the testing vendor will download the grade information to DBPR's system and at that point the system will automatically issue a license number. This can take up to 48 hours. After DBPR issues the license number, you must access your online account and print your license. There will be no license sent by mail.
- b) Employment Information
 - i) Upon passing the examination, an applicant will receive a certificate of licensure. This does not mean the applicant's license is "active". The applicant or qualifying broker may activate an associate's license upon securing employment by filing form DBPR RE 11. The qualifying broker can also add (activate) the sales associate via the broker's online account with DBPR.
- c) Post-Licensure Education
 - i) In accordance with Florida Real Estate Commission Rule 61J2-3.020(1) of the Florida Administrative Code, all applicants for licensure who pass the state sales associate examination must satisfactorily complete a Commission prescribed or approved post-licensing course prior to the first renewal following initial licensure (i.e., in the applicant's first year of licensure).
 - ii) Please see Department of Business and Professional Regulation [Ask us](#) icon, on website, for additional information.
- d) Refunds
 - i) Submitting this application and required fees implies your intent to pursue licensure. The department must receive your written request for a refund, per Section 215.26 (2), Florida Statutes, no more than 3 years after the right to a refund has accrued.
 - ii) For more information on refunds, see also Rule 61J2-2.0261 of the Florida Administrative Code.