

**STATE OF NEVADA**  
**DEPARTMENT OF BUSINESS AND INDUSTRY**  
**REAL ESTATE DIVISION**  
3300 W. Sahara Ave., Suite 350, Las Vegas, Nevada 89102  
(702) 486-4033 / [realest@red.nv.gov](mailto:realest@red.nv.gov) / <http://red.nv.gov/>

**EXPERIENCE VERIFICATION FOR A NEVADA REAL ESTATE LICENSE**

**FORM MUST BE COMPLETED BY VERIFYING BROKER, DEVELOPER OR BROKER-SALESPERSON MANAGER**

**1. Name:**

**License Number:**

**State of issuance:**

**2. Employment History:** ☐ Full-time ☐ Part-time

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**3. Employment Dates:**

From \_\_\_\_\_ to \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

Month / Day / Year

Month / Day / Year

**Multiple lines may be used for breaks in employment with same broker and company only.**

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**4. Declaration:** I, \_\_\_\_\_, say that in relation to the period of time listed above, that the applicant named above held an active real estate license and was/is associated with the company named \_\_\_\_\_; and that I am/was the duly licensed real estate broker, registered developer or broker-salesperson manager for said company. Under penalty of perjury, I declare that the foregoing is true and correct.

Name:

License Number:

Signature: