STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION

TIMESHARE INSTRUCTOR APPLICATION

☐ PRE-LICENSING	☐ CONTINUING EDUCATION
1. Name of Applicant:	
Mailing Address:	
City, State, Zip:	
Business Phone:	Fax Number:
2. Name and address of Sponsor for which the	applicant will instruct:
3. Title of Course which the applicant will inst	truct: COURSE NUMBER #:
4. PROOF OF QUALIFICATION MUST BE	ATTACHED to include:
	f schooling and experience. Describe experience in the field in which esume clearly indicates how applicant is qualified to teach subject
• Copies of applicable documents (licenses,	certificates, etc).
QUESTIONS 5, 6 AND 7 MUST BE ANSWE	RED BY APPLICANT:
•	cense or certificate by any Federal, State, County or City agency?
Yes No Solution No	If yes, attach an explanation. en suspended, revoked or subject to discipline?
Yes No	If yes, attach an explanation. ction by any Federal, State, County or City agency?
Yes No No	
INCOMPLETE SUBMISSION	WILL RESULT IN DELAY OF APPLICATION
I declare under penalty of perjury under laws consisting of pages is true and correct.	of the State of Nevada that the foregoing attached statement
Executed on:	(Signature)
(=)	(Print Name)
	R NRED INTERNAL USE ONLY
Date:	Approved / Denied By: