



REAL ESTATE ADVISORY REVIEW COMMITTEE REVIEWER APPLICATION FORM (Please Print or Type)

***If additional space is needed for any of the areas on this application, please attach a separate sheet for those items. *** PLEASE COMPLETE THIS FORM, DO NOT ATTACH A RESUME AND REFER TO IT ON EACH QUESTION.

Name: Shana Wilgar	License #	Phone Nos.:	Business (⁷⁰²) <u>7</u>	7122042
Address:10845 Griffith Peak Dr. #2			Facsimile ()_	
E-mail address: Shana.wilgar@realatlas.com		_:	Other ()_	
Profession:		Years in p	rofession: 20	

Real estate license and property management permit

List Professional certifications, Licenses and Designations held and dates: (Please attach a copy of each)

Type of License/certification/designation:	Name under which it was held:	Dates held:
1. Real Estate License	Shana Wilgar	1/2002-present
2. Property Management Permit (inactive)	Shana Wilgar	5/14/2014-current but inactive status
3.		
4.		

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BUSINESS/BROKERAGE HISTORY:

Please list business/brokerage history for the past five (5) years; begin with current business/employer.

Name of Business/Brokerage:	Title:	Dates of Employment	t: Major Activities:
Atlas NV LLC	Acquisitions Team Lead	4/29/2019-present	Overseeing the day to day operations of all sales transactions as well as alalyzing potential new transactions.
Oishi's Property Management	Assistant Vice President/Senior Porperty Manager	2013-1/27/2019	Standard property management duties under the direction of the company owner/vice president.
Realty One Group	Realtor (1099)	1/30/2019-4/29/2019	General real estate sales.

EDUCATION/TRAINING BACKGROUND:

Institution attended:	Dates attended:	Type of degree/certification obtained:
Southern Nevada School of Real Estate	2001	Real Estate course completion
Key Realty	2014	Property Mangement course completion certificate

AREAS OF EXPERTISE:

List major areas of specialization or subject expertise related to the real estate industry: (i.e. real estate brokerage residential/commercial, property management, new home sales, escrow/title, mortgage lending, subdivision development or tax free exchanges).

Residential sales, leasing and property management.

Please list any foreign languages or sign language, in which you have sufficient fluency:

COMMITTEES/BOARDS EXPERIENCE:

Please list any Grievance/Professional Standards boards or committees and/or any mediation experience you have:

Name of Board/Committee:	Your title on that Board/Committee:	Dates of Service on Board/Committee:
1.		
2.		
3.		
4.		

Please explain, in the space below, why you feel you would be a good candidate for membership on this committee:

As a licensed Realtor for the last 20yrs I have seen a wide variety of transactions as well as the issues that can arise during transactions. I have also helped

train staff in various roles over the yeras on best practices wiht regards to residential sales, leasing and property management (while my permit was active).

That being said I have also been in a variety of continuing education classes and there is definitely room for improvement and a need for CE classes to be

taken a bit more serious in some cases as we are bound by our duties owed as an agent with regards to the clients we serve.

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DISCIPLINARY ACTION:

Have you ever had any prior disciplinary action through any regulatory agency with which you are or were licensed?

Tes No If yes, please complete the following. If more space is necessary, please attach on a separate s	Yes	No 🗸	If yes, please complete the following: If more space is necessary, please attach on a separate she
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Name of Regulatory Agency:	Type of license held:	Date of Disciplinary action:	Type of Disciplinary action:
1.			
2.			
3.			

GEOGRAPHIC SERVICE AREA:

Las Vegas Greater Area North Eastern Nevada

Carson/Douglas Central Nevada Fallon/Lyon

Other:

Please mark which geographical area of the state in which you will be able to participate on the committee:

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REFERENCES:

Please list the name, address and telephone numbers of at least two (2) references who would know your capabilities and can attest to the information you have provided on this application: (Please do not use any current Commissioners as references)

Name:	Address:	Telephone:	Fax:	Yrs Acquainted:
Amanda Brookhyser 1.	9836 Russett Wood Cicle, Las Vegas NV 89117	702-279-1419	1	28yrs
2. Barbara Brown	9108 Vista Greens Way #106, Las Vegas NV 89134	702-813-3230	/	39yrs

This application shall be presented to the Nevada Real Estate Commission for review and approval, or disapproval, at the next regularly scheduled meeting. You will receive notification of the Commission's decision from the Administration Section Manager by mail.

By submitting this application I understand that serving as a member of the Real Estate Advisory Review Committee as established by NAC 645.490, I agree to participate in an **audit review of real estate education courses**.

Further, I understand that I will serve without compensation, but as a member of the Real Estate Advisory Review Committee I am entitled to receive a per diem allowance and travel expenses (NAC 645.490(6)), as provided for state officers and employees generally for the period during which the member was engaged in the discharge of his/her official duties, at the rate established in the Nevada State Administrative Manual.

I certify that the information provided in this application and any other information I am submitting with this application is true and correct to the best of my knowledge and that I may be removed from the approved list of Real Estate Advisory Review Committee members for intentionally falsifying the information provided. I understand that all of the information provided is a public record. I agree to abide by the Policies and Procedures and the Rules of Conduct of this Committee.

If I am chosen to be a member of the Real Estate Advisory Review Committee, I agree to perform the duties to the best of my ability in an ethical and proper manner and in accordance with the policies and procedures and rules of conduct.

Signed on this the <u>16</u> day of	, 20 ²² .
Slana Wilgar Signaturi Shana Wilgar	
For Division Use Only:	
Date application received: $3/16/22$	Date scheduled for Commission review: June 7-9, 2022
Decision of Commission: APPROVED D	DISAPPROVED
If disapproved, state reason for this decision:	

Date letter sent to applicant with Commission decision:

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