

**STATE OF NEVADA  
DEPARTMENT OF BUSINESS AND INDUSTRY  
REAL ESTATE DIVISION  
3300 W. Sahara Avenue, Suite 350  
Las Vegas, Nevada 89102**



**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: Roberta Doyen-Thomas License # BS.0145044MGR Phone Nos.: Business ( 775 ) 220-5254  
 Address: 324 Bayhill Circle Dayton, NV 89403 Facsimile ( 775 ) 246-8505  
 E-mail address: Roberta.Thomas@cbselectre.com Other ( ) \_\_\_\_\_  
 Profession: Real Estate Broker/Manager Years in profession: 10 Years

Broker Salesperson 9-30-21-9-30-23, Property Management Permit 9-30-21-9-30-23

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. Broker/Salesperson-BS.0145044MGR	Roberta Doyen-Thomas	9-30-2016 to 9-30-23
2. Property Management Permit-PM.0166531 DES	Roberta Doyen-Thomas	9-14-2015 to 9-30-23
3. Salesperson-S.0177129	Roberta Doyen-Thomas	9-14-2015 to 9-30-2016
4.		

**BUSINESS/BROKERAGE HISTORY:**

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

<b>Name of Business/Brokerage:</b>	<b>Title:</b>	<b>Dates of Employment:</b>	<b>Major Activities:</b>
Coldwell Banker Select	Broker/ Manager Admin	10-17-2014	Started as an Admin and worked into the Broker Manager
Coldwell Banker Hedges Realty	Salesperson	2007-2010	Salesperson/Multifamily housing & Property Manager.

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**EDUCATION/TRAINING BACKGROUND:**

<b>Institution attended:</b>	<b>Dates attended:</b>	<b>Type of degree/certification obtained:</b>
Monterey Highschool	Graduated 1978	Diploma
Kirkwood Community College	2006 & 2007	Real Estate License & General Education

**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).

Multi family housing, property management and residential real estate.

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

None

**COMMITTEES/BOARDS EXPERIENCE:**

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

<b>Name of Board/Committee:</b>	<b>Your title on that Board/Committee:</b>	<b>Dates of Service on Board/Committee:</b>
1. Select Cares Committee	Member	2018-present
2.		
3.		
4.		

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

I enjoy what I do and I am committed to doing my job correctly and I expect nothing less of my agents and other agents that I have transactions with.

Our education for our agents is crucial and having the best educators with the best teaching and information is something we have to strive for as an industry

I will take this position very seriously , I want to make sure that we as agents are getting the best possible education for our continued growth in this business.

I haven't been a part of committee's in the past, but this one is worth my time, effort and comittment. Please consider me for this position. Thank you!

**DISCIPLINARY ACTION:**

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

Yes  No  If yes, please complete the following: If more space is necessary, please attach on a separate sheet.

Name of Regulatory Agency:	Type of license held:	Date of Disciplinary action:	Type of Disciplinary action:
1.			
2.			
3.			

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**GEOGRAPHIC SERVICE AREA:**

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

- Carson/Douglas
- Central Nevada
- Fallon/Lyon
- Las Vegas Greater Area
- North Eastern Nevada
- Other:

**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)**

<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>	<b>Fax:</b>	<b>Yrs Acquainted:</b>
1. Debbie Baldauskas	175 HWy50E Dayton, NV 89403	775 4501003	775 246-8505	8
2. Tracy Mcleod	896W. Nye Lane #104 Carson City NV 89703	775 230-0421	775 507-3995	7

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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 2 day of March, 20 22



Signature of applicant

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**For Division Use Only:**

Date application received: 3/8/22 Date scheduled for Commission review: March 29-31, 2022

Decision of Commission: APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

If disapproved, state reason for this decision:

Date letter sent to applicant with Commission decision: \_\_\_\_\_