



The Commonwealth of Massachusetts
Division of Professional Licensure
Board of Registration of Real Estate
Brokers and Salespersons
1000 Washington Street, Suite 710
Boston, MA 02118-6110
617-727-2373

(REVISED 7-11-16)

INSTRUCTIONS FOR THE APPROVAL PROCESS OF A REAL ESTATE INSTRUCTOR

You will note that the request form is divided up into sections. Each applicant is required to complete the sections relative to their own circumstances.

- (a) All applicants must provide a medical certificate indicating freedom from tuberculosis (see Section 4);
- (b) All applicants must sign an attestation and have the signature notarized (see Section 6);
- (c) Only Section 1 Applicants may complete a thirty (30) hour Board approved Instructor course;
- (d) All applicants must co-teach or audit the broker or salesperson course at an approved real estate school or program (the school must complete Section 7) (Co-teaching or auditing a broker or salesperson course is not a substitution for the thirty (30) hour Instructor course);
- (e) All applicants must enter his/her name, address and date of birth on the top of the Request For Instructor Approval form; and
- (f) All experience requirements may only be met by experience that was obtained no more than two (2) years prior to making an application for instructor approval.

SECTION 1 APPLICANTS

This section is for currently licensed Massachusetts Brokers who have at least two (2) years of experience as a Massachusetts Real Estate Broker.

- Enter your Massachusetts Broker license number located in the lower left hand corner of your license card (not the serial or control number).
- Enter the issue and expiration dates of your broker license.
- Either take the Teaching Methods portion of the Instructor Examination OR complete a thirty (30) hour approved instructor course at a Board approved real estate school/program.
 - If you took the thirty (30) hour Instructor course, the school/program will have to complete Section 8 of this Application.
 - If you opt to take the Teaching Methods Examination, you will need to attach the original score report (no photocopies) provided by PSI Services LLC, the exam service provider. The score must be at least a 70. Contact PSI Services LLC at 800-733-9267 to schedule the examination and specify the Teaching Methods portion of the Real Estate Instructor Examination.
- Continue to Sections 4, 6, 7 and 8 (if applicable).

SECTION 2 APPLICANTS

This section is for current Massachusetts Real Estate Licensees with less than two (2) years of Massachusetts Real Estate Broker experience OR has at least two (2) years of Massachusetts Real Estate Salesperson experience. You may add broker and salesperson experience together for a total of two (2) years:

- Enter your Massachusetts Salesperson or Broker license number (not the serial or control number).
- Enter the issue and expiration dates of your license.
- Successfully complete the **entire** Instructor Examination. The score must be at least a 70. Contact PSI Services LLC at 800-733-9267 to schedule the examination and specify the Real Estate Instructor Examination. Attach original score report (no photocopies). (**Only Section 1 Applicants may complete a thirty (30) hour Instructor course**).
- Continue to Sections 4, 5, 6 and 7.

SECTION 3 APPLICANTS

This section is for Applicants unable to meet the requirements listed under Section 1 or Section 2. For example, Applicants lacking a Massachusetts Real Estate license, a licensed Massachusetts Real Estate Salesperson with less than two (2) years of salesperson experience or Applicants with only related real estate field experience.

- Have your supervisor(s) complete the Real Estate Related Field Experience form for each job title and make copies if needed.

***All applicants that need to use Section 3 must submit, to this Board, the completed RELATED REAL ESTATE FIELD EXPERIENCE form for approval PRIOR to taking the entire Instructor Examination. Once you receive the approved completed form back from the Board, you may take the examination.**

- Enter job title(s) and dates of related real estate field employment for a period of time that totals at least two (2) years (attach additional paper if needed).
- If applicable, remit an original, certified Record of Standing or Licensee History from all out-of-state Real Estate Board(s).
- Successfully complete the **entire** Instructor Examination (after Board approval). The score must be at least a 70. Contact PSI Services LLC at 800-733-9267 and specify the Real Estate Instructor Examination. Attach original score report (no photocopies).
- Continue to Section 4 and then, if you are using time that you were a licensed Massachusetts Real Estate Salesperson, complete Section 5 and all applicants continue to Sections 6 and 7.

SECTION 4

ALL applicants must obtain a medical certificate showing freedom from tuberculosis. This can be obtained from your own physician or the Department of Public Health in most municipalities.

SECTION 5

This section is for applicants who are using their experience as a licensed Massachusetts Real Estate Salesperson to complete the experience requirement. It must be completed by the broker with whom you were affiliated and you must have worked at least 25 hours per week.

SECTION 6

ALL applicants must sign this attestation and have the signature notarized.

SECTION 7

This section is for ALL applicants. This certifies that your co-teaching or audit requirement has been met. Co-teaching or auditing a broker or salesperson course is not a substitution for the thirty (30) hour Instructor course which may only be used by Section 1 Applicants.

SECTION 8

This section is **ONLY** for currently licensed brokers, who have two (2) years of experience as Massachusetts brokers, who opt to take the thirty (30) hour Board approved Instructor course rather than the Teaching Methods portion of the test. **Only Section 1 Applicants may complete a thirty (30) hour Instructor course.**

The instructor course must be completed at a real estate school/program authorized by this Board to administer the instructor course. The school/program must sign the section and affix the school/program stamp.

Note:

Remember to attach any and all required documentation and submit everything together (except in the case of the related real estate field experience form). If you are making copies be sure they are clear and legible and on 8 1/2 by 11" paper. There is no fee for this approval at this time and you will be issued a certified Letter of Approval if your request is approved. You must keep the original of this letter and provide a photo-copy to the school/program(s) with which you wish to affiliate. If you lose the original, a fee will be required to produce a new record of your standing as an instructor. The school/program will notify the Board of your affiliation. There will be no reason for you to make such notice.

If you have any questions concerning these materials, you may call the Board at (617) 727-2373.

Important note for examination applicants: Examination scores are valid for one year from the date of passing the examination. The Board advises the examination be your last step in the application process. This will ensure all requirements are met timely and your score does not expire.

Section 3 Applicants must submit, to this Board, the completed RELATED REAL ESTATE FIELD EXPERIENCE form for approval PRIOR to taking the examination. This must be done in order for the Board to determine whether or not your experience will apply toward your instructor approval. If you fail to submit this form prior to testing, and your experience does not qualify, you may be required to take the test again since scores are only valid for one year and you need two (2) years of experience.

Remit completed Applications to the Massachusetts Real Estate Board, 1000 Washington Street, Suite 710, Boston, MA 02118-6100.

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The Commonwealth of Massachusetts
Division of Professional Licensure
 Board of Registration of Real Estate Brokers and Salespersons
 1000 Washington Street, Suite 710
 Boston, MA 02118-6100
 617-727-2373

REQUEST FOR INSTRUCTOR APPROVAL

(REVISED 7-11-16)

APPLICANT NAME: _____

APPLICANT'S MAIDEN NAME: _____

ADDRESS: _____
 STREET/PO BOX

<i>FOR OFFICE USE ONLY</i>
APPROVAL DATE: _____
INSTRUCTOR NUMBER

CITY STATE ZIP CODE TELEPHONE NUMBER

DATE OF BIRTH: _____

Have you ever been convicted of a felony or misdemeanor in the United States or any country or foreign jurisdiction, other than a traffic violation for which a fine of less than \$100.00 was assessed? YES NO

If yes, attach statement containing the name of court(s) and jurisdiction where conviction(s) occurred, the nature of the conviction, the date(s) of conviction and a brief description of any events in connection with the conviction that you feel are relevant to the Board's understanding of the conviction. Also, provide three (3) letters of reference and if probation was served, a letter from the probation officer.

Has any disciplinary action been taken against you by a licensing /certification board located in the United States or any country or foreign jurisdiction? YES NO

If yes, attach a copy of the decision, description of complaint and resolution.

SECTION 1

Are you currently a licensed Massachusetts Real Estate Broker with two (2) years of broker experience? YES NO
 If *Yes* complete this section, If *No* check box and continue to section 2

Broker License Number: _____ Issue date: _____ Expiration date: _____

- I have taken the approved thirty (30) hour Instructor course - the school must complete Section 8
- I have passed the Teaching Methods Portion of the Instructor Examination – attach original score report

Continue to sections 4, 6,7 and 8 (if applicable).

SECTION 2

Are you a current licensed Massachusetts Real Estate Salesperson with two (2) years of salesperson experience or a current Massachusetts Real Estate Broker with less than two (2) years of broker experience? Yes No
 If *Yes* complete this section, If *No* check box and continue to Section 3

License Number: _____ Type Class (S or B): _____ Issue Date: _____ Expiration Date: _____

- I have passed the entire Instructor Examination - attach your original score report

Continue to sections 4, 5, 6 and 7.

SECTION 3

I do not satisfy the requirements of Section 1 or Section 2. However, I have the following related real estate experience:

Job Title: _____ Employment Dates: _____ To _____

Job Title: _____ Employment Dates: _____ To _____

Job Title: _____ Employment Dates: _____ To _____

If applicable, MA Real Estate License Number: _____ Issue Date: _____ Expiration Date: _____

If applicable, you must remit an original, certified Record of Standing or Licensee History from all out-of-state Real Estate Board(s). You must also have your supervisor(s) complete the Related Real Estate Field Experience form and submit it to this Board for approval prior to taking the examination.

I have passed the entire Instructor Examination - attach your score report

Continue to Section 4, 5 (if applicable), 6 and 7.

SECTION 4

ALL INSTRUCTORS ARE REQUIRED TO PROVIDE A MEDICAL CERTIFICATE SHOWING FREEDOM FROM TUBERCULOSES IN A COMMUNICABLE FORM. YOU MUST ATTACH THE ORIGINAL TO THIS FORM. THE TEST MUST HAVE BEEN CONDUCTED WITHIN THE 12 MONTH PERIOD PRIOR TO THE SUBMISSION OF THIS APPLICATION.

SECTION 5

BROKER AFFILIATION

If you need to combine work experience from more than one Broker they may each attest to the time you worked for them. If you need additional space attach a notarized letter from the Broker giving the same information that is requested here.

NAME OF SALESPERSON

I hereby certify that the applicant named above has been actively affiliated with me in the capacity of a Salesperson from:

_____ TO _____
DATES OF AFFILIATION

For at least 25 hours per week. I attest to this under the pains and penalties of perjury.

BROKER SIGNATURE

DATE

LICENSE NUMBER

SECTION 6

I, _____, hereby state under the pains and penalties of perjury that the information provided on this application for approval as a Massachusetts Real Estate Instructor or attached or incorporated herein is truthful and accurate. I further attest that, pursuant to M.G.L c. 62c, s.49a, to my best knowledge and belief, I have filed all state tax returns and paid all state taxes required by law. I further understand and agree that should any information provided be false it will be grounds for the Massachusetts Board of Registration of Real Estate Brokers and Salespersons to suspend or revoke any license, approval or authorization issued to me in accord with Massachusetts law.

The Board is certified by the Criminal History Systems Board [ID# MAREG G] to access data about convictions and pending criminal cases. Those records—and other Federal and professional records—may be checked as part of your licensing process. No records are automatic disqualifiers; you will be given an opportunity to discuss any issues with the Board. However, the Board does not issue licenses to applicants who are currently on probation or parole.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF NOTARY

MY COMMISSION EXPIRES ON:

SECTION 7

I, _____, AS AUTHORIZED AGENT, HEREBY STATE UNDER THE PAINS AND PENALTY OF PERJURY THAT THE APPLICANT NAMED HEREIN HAS COMPLETED THE CO-TEACH OR AUDIT REQUIREMENT (**required of ALL candidates**). Co-teaching or auditing a broker or salesperson course is not a substitution for the thirty (30) hour Instructor course which may only be used by Section 1 Applicants.

SIGNATURE OF AUTHORIZED AGENT DATE COURSE COMPLETED

AFFIX
SCHOOL STAMP

SECTION 8

I, _____, AS AUTHORIZED AGENT, HEREBY STATE UNDER THE PAINS AND PENALTY OF PERJURY THAT THE APPLICANT NAMED HEREIN HAS COMPLETED THE 30 HOUR INSTRUCTOR PROGRAM THAT THIS SCHOOL IS AUTHORIZED, BY THE BOARD, TO ADMINISTER (required of Brokers who opt not to take the examination). This section may only be used by Section 1 Applicants.

SIGNATURE OF AUTHORIZED AGENT DATE COURSE COMPLETED

AFFIX
SCHOOL STAMP

MANDATORY

My social security number is:

_____ - _____ - _____

Pursuant to G.L. c. 62C, § 49A, the Division of Professional Licensure is required to obtain your social security number and forward it to the Department of Revenue. The Department of Revenue will use your social security number to ascertain whether you are in compliance with the tax laws of the Commonwealth.

**CRIMINAL OFFENDER RECORD INFORMATION (CORI)
ACKNOWLEDGEMENT FORM**

The Division of Professional Licensure by itself and on behalf of boards of registration pursuant to M.G.L. c. 13, §9 [hereinafter, "Division of Professional Licensure"] is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective license applicants and current licensees.

As a license applicant or current licensee, I understand that a CORI check will be submitted for my personal information to the Department of Criminal Justice Information Services ("DCJIS"). I hereby acknowledge and provide permission to the Division of Professional Licensure to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the Division of Professional Licensure written notice of my intent to withdraw consent to a CORI check.

FOR LICENSING PURPOSES ONLY:

The Division of Professional Licensure may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that the Division of Professional Licensure must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and acknowledge that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

Signature

Date

NOTE: DPL cannot accept this two-page CORI acknowledgment form unless it is signed in the presence of a notary public who has likewise verified identity.

SUBJECT INFORMATION: (An asterisk (*) denotes a required field)

*Last Name	*First Name	Middle Name	Suffix
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*Maiden Name (or other name(s) by which you have been known)

*Date of Birth	Place of Birth
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*Last Six Digits of Your Social Security Number: _____ - _____

Sex: _____ Height: ____ ft. ____ in. Eye Color: _____

Driver's License or ID Number: _____ State of Issue: _____

Current and Former Addresses:

Street Number & Name	City/Town	State	Zip
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Street Number & Name	City/Town	State	Zip
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IDENTITY VERIFICATION SECTION:

VERIFICATION BY NOTARY:

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____ (name of document signer), and proved to me through satisfactory evidence of identification, which was the following:

- Passport State-issued driver's license Military identification State-issued identification card

to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Notary Public:

Notary Commission Expires On

RELATED REAL ESTATE FIELD EXPERIENCE
TO BE COMPLETED BY THE EMPLOYER

The individual providing you with this form is in the process of becoming an approved Real Estate Instructor. As part of the approval process the Board needs to understand the nature of the applicants work experience. In order for this work experience to help the candidate qualify for approval the actual work must have been done for at least twenty-five (25) hours per week and must be in a field related to real estate. Your assistance in helping the Board to make an informed determination as to the relevance of the work history is appreciated.

NAME OF APPLICANT FOR INSTRUCTOR APPROVAL

EMPLOYER 1

APPROVED

DENIED

LIST THE FOLLOWING INFORMATION AS IT PERTAINS TO THE ABOVE NAMED APPLICANT (ATTACH
ADDITIONAL PAPER AS NEEDED)

JOB TITLE

TO
DATES OF EMPLOYMENT

COMPANY / BUSINESS NAME:

BRIEFLY DESCRIBE THE NATURE OF YOUR COMPANY OR BUSINESS

(SUPERVISOR) BRIEFLY DESCRIBE THE DAILY RESPONSIBILITIES OF THE APPLICANT AS THEY APPLY TO
THE REAL ESTATE FIELD

HOURS WORKED PER WEEK: _____

I ATTEST UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS
TRUTHFUL TO THE BEST OF MY KNOWLEDGE AND ABILITY.

EMPLOYER SIGNATURE

DATE

EMPLOYER 2

APPROVED

DENIED

LIST THE FOLLOWING INFORMATION AS IT PERTAINS TO THE ABOVE NAMED APPLICANT (ATTACH ADDITIONAL PAPER AS NEEDED)

JOB TITLE _____ TO _____
DATES OF EMPLOYMENT

COMPANY / BUSINESS NAME:

BRIEFLY DESCRIBE THE NATURE OF YOUR COMPANY OR BUSINESS

(SUPERVISOR) BRIEFLY DESCRIBE THE DAILY RESPONSIBILITIES OF THE APPLICANT AS THEY APPLY TO THE REAL ESTATE FIELD

_____ HOURS WORKED PER WEEK: _____

I ATTEST UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUTHFUL TO THE BEST OF MY KNOWLEDGE AND ABILITY.

EMPLOYER SIGNATURE _____

DATE _____

PRINT YOUR NAME, TELEPHONE NUMBER, AND ADDRESS HERE:

Your experience must be approved by the Board prior to taking the Instructor examination. If you take the examination without first ensuring that your experience qualifies under the instructor regulation you may forfeit both the examination fee and the score. After your employer has completed this form send it to:

MASSACHUSETTS BOARD OF REAL ESTATE
1000 WASHINGTON STREET, SUITE 710
BOSTON, MA 02118-6100

BE SURE TO ENCLOSE A STAMPED RETURN ENVELOPE

After the Board reviews this form it will be returned to you. If the Board has approved your experience you may take the Instructor examination. After passing the test you must attach this approved form to your Request for Instructor Approval form along with your score report and medical certificate. When you have everything, you may submit the request to this Board. If your experience is denied, you do not qualify to be an approved real estate instructor and you should not continue with the approval process.

FOR BOARD USE ONLY

YOUR EXPERIENCE WAS DENIED FOR THE FOLLOWING REASON(S):

