



REQUEST FOR DETERMINATION OF BROKER ELIGIBILITY

All salespersons should request this evaluation **PRIOR** to sitting for the broker’s examination. **It is the licensee’s responsibility to know whether or not he or she meets the appropriate qualifications before taking the broker’s examination.**

Click the *Submit by Email* button at the bottom of the page to email the form to the Commission. The form may also be returned to the Commission by fax to 334.270.9118 or mail to 1201 Carmichael Way, Montgomery, AL 36106. You may also scan your form and email it to the Commission at arec@arec.alabama.gov. If you prefer to print and mail the form, please complete it in black or blue ink.

PART I

I currently hold an Alabama: *(Check one)*

SALESPERSON’S LICENSE

OR

RECIPROCAL SALESPERSON’S LICENSE and I am requesting an evaluation of my education and experience in order to qualify for a broker license.

Name on License *(Please print)* _____

Salesperson’s License Number _____

PART II

You may have your evaluation mailed, faxed, OR emailed to you. Please complete **ONE** of the following:

Mailing Address _____

City State Zip

Fax Number _____

Email Address _____

Signature _____ Phone _____ Date _____