



State of New Jersey

DEPARTMENT OF BANKING AND INSURANCE
REAL ESTATE COMMISSION
PO Box 328
TRENTON, NJ 08625-0328

CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

RICHARD J. BADOLATO
Commissioner

TEL (609) 292-7272
FAX (609) 292-0944

APPLICATION FOR REAL ESTATE CONTINUING EDUCATION (CE) WAIVER

Submit all waivers by E-MAIL, MAIL or FAX License Renewal Deadline is June 30, 2017
E-MAIL: realestate@dobi.state.nj.us
MAIL to: NJ REAL ESTATE COMMISSION - Education Bureau
P.O. Box 328
Trenton, NJ 08625-0328

PLEASE TYPE, OR LEGIBLY PRINT, ALL REQUIRED INFORMATION BELOW

Licensee Full Name:
License Reference #:
Home Address:
City: State: Zip Code:
Phone (w/ area code):
E-Mail Address:
License Type: [ ] Broker, [ ] Referral Agent, [ ] Salesperson
Date License Expires (mm/dd/yy):

Select only one CE waiver type:
NOTE: All occurrences must be during the current two year licensing cycle.
[ ] Incapacitating Illness Explain:
[ ] Active Duty (US Military) Explain:
[ ] Emergency Explain:
[ ] Hardship (Not Financial) Explain:
Detailed documentation MUST BE provided for any of the above occurrences.
Additional information and/or documentation may be requested by the NJREC.

HAVE YOU COMPLETED ANY CREDITS DURING THIS LICENSING CYCLE? [ ] YES [ ] NO
If YES, please provide all certificates of completion.

I DO HEREBY CERTIFY THAT ALL INFORMATION PROVIDED, AND ANY ATTACHMENTS, ARE TRUE AND ACCURATE.

Full Name (SIGN) Date (mm/dd/yy)