



South Carolina Department of Labor, Licensing and Regulation

South Carolina Real Estate Commission

110 Centerview Dr. • Columbia • SC • 29210

P.O. Box 11847 • Columbia • SC 29211-1847

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www.llronline.com/POL/REC/



EXAM APPLICATION FOR REAL ESTATE

APPLYING FOR (check one): [ ] SALESPERSON [ ] PROPERTY MANAGER [ ] BROKER

Mail the following to the above address:

- Check or money order in the amount of \$25 made payable to SCREC
A returned check fee of up to \$30, or an amount specified by law, may be accessed on all returned funds. (All fees are non-refundable)
• Legible copy of driver's license, state issued ID or Passport
• Copy of social security card
• Notarized Verification of Lawful Presence (attached)
• Real Estate School Certificates, Certification of Licensure or Qualifying Transcript
• Commission Approved Criminal Background Report

Note for SC Residents: To find your Congressional District you may go to: http://www.scstatehouse.gov/legislatorssearch.php

A criminal background check is required of all applicants from a source approved by the Commission Pursuant to S.C. Code Section 40-57-115. Please visit the following link to obtain your SC Real Estate Commission criminal background check prior to submission of your application: http://llr.sc.gov/recheck

APPLICANT INFORMATION

Full Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ District: \_\_\_\_\_
(Street, City, State & Zip Code) Congressional District (SC Residents Only)

Mailing Address: \_\_\_\_\_
(If different than above)

Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

For Statistical Purposes: Sex: M F Race (For statistical purposes only): \_\_\_\_\_

REAL ESTATE WORK EXPERIENCE (Past 5 years, attach supplemental sheet if necessary)

Company: \_\_\_\_\_ Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_ Dates: \_\_\_\_\_

REAL ESTATE EXPERIENCE

Please list any other states in which you have previously or currently hold a Real Estate license (If needed, attach additional sheet to list all.):

State: \_\_\_\_\_ Dates Licensed (from-to): \_\_\_\_\_

State: \_\_\_\_\_ Dates Licensed (from-to): \_\_\_\_\_

State: \_\_\_\_\_ Dates Licensed (from-to): \_\_\_\_\_

## QUALIFYING EDUCATION

Check One:     High School Graduate                       GED                       College Graduate

- **South Carolina Residents or non-residents without a current real estate license in another jurisdiction:** Please attach the South Carolina real estate school certificates or transcripts by which you will qualify for examination. If you have obtained a Juris Doctor, Bachelor of Laws degree, or a baccalaureate degree with a major in real estate from an accredited college or university, you may submit a transcript evidencing completion of the degree program in lieu of completing South Carolina qualifying real estate courses.

OR

- **Non-residents with a current real estate license in another jurisdiction:** Please attach or have the applicable State Board mail in the **Certificates of Licensure** from each state in which you are currently or were previously licensed in during the past five (5) years. Certificates must be dated within the past 6 months.

## DISCIPLINARY HISTORY

1. Have you ever been convicted of or pled guilty or nolo contendere to a crime (other than a minor traffic offense)? If yes, attach a full written explanation. Include all pertinent information such as charges, dates, locations and sentences.  YES     NO
2. Have you ever been denied a license/registration to practice a profession or occupation in any state or has any disciplinary action been taken against your license in any state? (If yes, explain on a separate sheet)  YES     NO

## PRIVACY ACT DISCLOSURE

*South Carolina Law requires that every individual who applies for an occupational or professional license provide a social security number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databanks established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.*

Other personal information collected by the Department for the licensing boards it administers is limited to such personal information as is necessary to fulfill a legitimate public purpose. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on the application may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act, and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical services.

## ATTESTATION AND SIGNATURE

I, \_\_\_\_\_, am the person described and identified, of good moral character,

(Print Name)

and the person named in all documents presented in support of this application. I certify that I have never been convicted of violating any Federal, State, Municipal or other law statute or ordinance, other than as disclosed as required within this application.

I certify that all statements contained herein are true and correct to the best of my knowledge. I further understand that false or incorrect information provided by me may result in the cancellation of any license issued pursuant to this application.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

**OUT OF STATE APPLICANTS ONLY**

**CONSENT TO JURISDICTION AND SERVICE OF PROCESS**

The undersigned applicant for South Carolina real estate licensure, being a non-resident of the State of South Carolina, does hereby irrevocably consent that if any action arises against the undersigned growing out of undersigned's acts or omissions as a real estate licensee within the State of South Carolina, suit may be commenced against said undersigned in the County of the State of South Carolina in which the said cause of action may arise, or in which plaintiff may reside, by the service of process upon the Administrator of the South Carolina Real Estate Commission, whom the undersigned hereby designates as agent for such service, and the undersigned further consents that such service shall be begun and held in all courts to be valid and binding as if due service had been legally made upon undersigned in the State of South Carolina.

\_\_\_\_\_  
Applicant Signature

Sworn and Subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Print Notary Name

\_\_\_\_\_  
Notary Public or

\_\_\_\_\_  
Commission Expiration Date



STATE OF SOUTH CAROLINA  
DEPARTMENT OF LABOR, LICENSING AND REGULATION  
**VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES**  
**AFFIDAVIT OF ELIGIBILITY**



Pursuant to Section 8-29-10, *et seq.* of the South Carolina Code of Laws (1976, as amended), the Department of Labor, Licensing and Regulation must verify that any person who applies for a South Carolina license is lawfully present in the United States. Complete and sign this affidavit of eligibility. The information provided is subject to verification.

**Section A: LAWFUL PRESENCE in the United States.**

The undersigned \_\_\_\_\_, of \_\_\_\_\_  
(Print clearly First, Middle, and Last name) (Home Address, City, State, and Zip Code)  
being first duly sworn deposes and states as follows:

**Check only one box:**

1.  I am a United States citizen; or

2.  I am a Legal Permanent Resident of the United States eighteen years of age or older; or

3.  I am a Qualified Alien or non-immigrant under the Federal Immigration and Nationality Act, Public Law 82-414, eighteen years of age or older, and lawfully present in the United States.

4.  Other: \_\_\_\_\_ Please submit any documentation that supports this status.

Date of Birth: \_\_\_\_\_

Alien Number: \_\_\_\_\_ I-94 Number: \_\_\_\_\_

**(If you checked number 2, 3, or 4 you must attach a copy of your immigration documents. See instruction sheet for a list of accepted immigration documents.)**

**Section B: ATTESTATION.**

**I understand** that in accordance with section 8-29-10 of the South Carolina Code of Laws, a person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall, in addition to other sanctions imposed by this State or the United States, be guilty of a felony, and upon conviction must be fined and/or imprisoned for not more than 5 years (or both).

**I understand** that the representations made in this Affidavit shall apply through any license(s) or renewals issued, and that I shall have an affirmative duty to immediately advise the Department of Labor, Licensing and Regulation of any change of my immigration or citizenship status.

**I swear and attest the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension, or revocation of a license, certificate, registration or permit.**

\_\_\_\_\_  
Signature of Affiant

SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Print Name

Notary Public for \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

## INSTRUCTION SHEET FOR COMPLETING AFFIDAVIT OF ELIGIBILITY

### **CHECK box 1:**

If you are a United States Citizen by birth or naturalization

### **CHECK box 2:**

If you are a Legal Permanent Resident and you are not a U.S. Citizen, but are residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant.

**PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.**

### **CHECK box 3:**

If you are a Qualified Alien. You are a Qualified Alien if you are:

An alien who is lawfully admitted for residence under the INA.

An alien who is granted asylum under Section 208 of the INA.

A refugee who is admitted to the United States under Section 207 of the INA.

An alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year.

An alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3).

An alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

An alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980.

An alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

**PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.**

### **ACCEPTED IMMIGRATION DOCUMENTS:**

Unexpired Reentry Permit (I-327)

Permanent Resident Card or Alien Registration Receipt Card With Photograph (I-551)

Unexpired Refugee Travel Document (I-571)

Unexpired Employment Authorization Card Which Contains a Photograph (I-766)

Machine Readable Immigrant Visa (with Temporary I-551 Language)

Temporary I-551 Stamp (on passport or I-94)

I-94 (Arrival/Departure Record) in Unexpired Foreign Passport

I-20 (Certificate of Eligibility for Nonimmigrant, F-1, Student Status)

DS2019 (Certificate of Eligibility for Exchange Visitor, J-1, Status)