

Examination Application 2022



601-1595 Bedford Highway, Bedford, Nova Scotia, B4A 3Y4

Phone: 902-468-3511 800-390-1015

Fax: 902-468-1016 800-390-1016

Website: nsrec.ns.ca licensing@nsrec.ns.ca

Registration: Complete this exam application and credit card authorization and email it to Pam Crane, Licensing Officer, licensing@nsrec.ns.ca. Submit your application no later than the Friday before your scheduled exam date.

Exam Location: Best Western, Chardonnay Rooms, 15 Spectacle Lake Dr, Dartmouth, NS B3B 1X7.

Exam Results: Results will be sent by email approximately 20 business days after the exam was written.

Exam Fee: \$115.00 tax included

PART A | APPLICANT INFORMATION

| | | | | | |
|--|--|---|-------------|------------------------------------|--|
| LAST NAME | | FIRST NAME | | FOR INTERNAL USE | |
| ADDRESS | | | | | |
| CITY | | PROVINCE | POSTAL CODE | | |
| PRIMARY PHONE | | ALTERNATE PHONE | | | |
| EMAIL ADDRESS | | | | | |
| TYPE OF EXAM <input type="checkbox"/> Salesperson <input type="checkbox"/> Broker | | | | | |
| TYPE OF COURSE COMPLETED <input type="checkbox"/> In Class <input type="checkbox"/> Online | | HAVE YOU WRITTEN THE EXAM BEFORE? <input type="checkbox"/> Yes <input type="checkbox"/> No | | IF YES, WHEN?: | |
| CHECK <u>MORNING OR AFTERNOON</u> . IF YOU ARE AVAILABLE TO WRITE MORNING AND AFTERNOON, CHECK BOTH. | | | | | |
| Friday, August 12 | | 1pm - 4pm <input type="checkbox"/> | | Thursday, November 3 | |
| Friday, September 2 | | 1pm - 4pm <input type="checkbox"/> | | Thursday, December 1 | |
| Friday, October 7 | | 1pm - 4pm <input type="checkbox"/> | | 1pm - 4pm <input type="checkbox"/> | |
| Once your exam application is processed, the time, date, and location will be confirmed on your receipt. | | | | | |

ACCOMMODATIONS
The Best Western hotel, Dartmouth, is offering a discounted rate of \$99 per night for students requiring overnight accommodations. Contact the Best Western for details.

PART B | DECLARATION

- In accordance with the By-law, I have completed the licensing course prior to submitting this exam application.
- I understand I will not be permitted to write if I am under required self-isolation due to COVID-19 on my available exam date.
- I understand the Commission may require additional COVID-19 safety measures such as wearing a mask or providing proof of full vaccination. I agree to abide by any and all safety measures in place at the time of my exam.
- I understand that submitting false information on an application to the Commission may jeopardize my eligibility to become licensed.

APPLICANT'S SIGNATURE _____

Credit Card Authorization Form



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Effective April 1, 2016, HST applies to all licensing, exam, audit/inspection and recovery fund fees.

CREDIT CARD DETAILS

| | | |
|--|-----------|---------------------|
| TYPE OF CARD | | |
| <input type="checkbox"/> AMEX <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA* | | |
| CARD NUMBER | | V-CODE |
| NAME ON CARD | | EXPIRY DATE (MM/YY) |
| BILLING ADDRESS | CITY/TOWN | PROV / POSTAL CODE |

***The Commission cannot process VISA DEBIT cards with this form.**

I hereby authorize the Nova Scotia Real Estate Commission to charge my credit card for:

(i.e. exam fee, licensing fees, reinstatement of licence, fines, licence renewals, etc.)

CARDHOLDER SIGNATURE