

UNLICENSED ASSISTANT

Please note: This form will enable the non-licensed personnel in your office to be entered into the **MLS** at the security level of 5 (or what is equivalent for an office assistant) This allows the named person to enter ANY OF YOUR FIRMS/AGENTS LISTINGS into the computer. Please check the information and sign below before sending to the Board office.

THIS FORM MAY ALSO BE USED TO ADD OFFICE ASSISTANT TO ACCESS BILLING INFORMATION IF INDICATED BELOW.

BUSINESS INFORMATION

NON-LICENSEE NAME: _____

OFFICE NAME: _____

OFFICE ADDRESS: _____

OFFICE PHONE: _____

PERSONAL INFORMATION

HOME ADDRESS: _____

CITY, STATE, ZIP: _____

HOME/CELL NO. _____

DATE OF BIRTH: _____

EMAIL ADDRESS: _____

DATE ASSIGNED TO OFFICE: _____

SIGNATURE OF (Non-licensee): _____

Please input the above named non-licensee into MLS or BILLING for my office.

SIGNATURE (Designated REALTOR®): _____

DATE: _____