

NATIONAL SCHOOL OF REAL ESTATE

5323 John F. Kennedy Blvd., North Little Rock, AR 72116 * Phone 501-753-1633 * Fax 501-753-3150

Please type or print. Mail or bring this application to NATIONAL SCHOOL OF REAL ESTATE at the above address.

60 Hour Sales Pre-Licensing Course

NAME: Last _____ First _____ Middle _____

Date of birth: _____ Last 4 digits of Social Security #: _____

ADDRESS: _____ City _____ State _____ Zip Code _____

TELEPHONE: Home _____ Work _____ Cell _____

AMOUNT ENCLOSED: (\$350 for payment in full or \$50 non-refundable deposit will reserve your place)

COURSE TO BE ATTENDED: Days _____ Weekends _____ Beginning Date _____

How did you learn about our school? Referral _____ Yellow Pages _____ Radio _____

Sign on JFK _____ Other _____

Date signed

Signature

FOR OFFICE USE ONLY:

ATTENDANCE RECORD

DAY COURSE	A.M.	P.M.		W/E COURSE	A.M.	P.M.
1.	___	___		1.	___	___
2.	___	___		2.	___	___
3.	___	___		3.	___	___
4.	___	___		4.	___	___
5.	___	___		5.	___	___
6.	___	___		6.	___	___
7.	___	___	ACCOUNT TOTAL: _____	CK# _____		
8.	___	___	AMOUNT PAID: _____	DATE _____		
			BALANCE DUE: _____			
			AMOUNT PAID: _____	DATE _____		
			BALANCE DUE: _____	CK# _____		