



Certified  
Residential Specialist

## Affidavit of Years of Experience

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**Please complete this form if you choose to use years of experience toward meeting your elective credit requirements.**

**Applicant's Name:** \_\_\_\_\_

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

The undersigned Applicant hereby certifies and swears that all information provided is true and factual. Should the Council find through confirmation or any other means that any statements made by Applicant are not factual; such statements will jeopardize Applicant's ability to be awarded or to retain the CRS designation. The undersigned Applicant declares that the following information is true.

I am an Applicant for the CRS Designation and as a part of that application process I certify that I have:

*Check one:*

- A minimum of five (5) years of real estate experience for 8 Elective Credits
- A minimum of ten (10) years of real estate experience for 16 Elective Credits

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

### **Certification of Applicant's Broker**

I hereby certify that the above statement concerning the number of transactions in which the Applicant has worked is true and correct and accurately reflects the work done by Applicant.

\_\_\_\_\_  
**Name of Broker (Please Print)**

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**Signature of Broker**

**Date**