

# SAMPLE

STATE OF CALIFORNIA  
BUREAU OF REAL ESTATE

## CE COURSE COMPLETION CERTIFICATE

RE 302 (Rev. 8/15)

LICENSEE & COURSE INFORMATION		
NAME OF LICENSEE		REAL ESTATE LICENSE NUMBER
CURRENT MAILING ADDRESS (STREET)		
CITY	STATE	ZIP CODE
NAME OF OFFERING AS APPROVED BY THE BUREAU		COURSE TYPE <input type="checkbox"/> LIVE COURSE <input type="checkbox"/> CORRESPONDENCE COURSE <input type="checkbox"/> CORRESPONDENCE/INTERNET
NUMBER OF CREDIT HOURS	DATE OF REGISTRATION	DATE OF SUCCESSFUL COMPLETION
COURSE LOCATION (STREET ADDRESS AND CITY)		

BUREAU OF REAL ESTATE OFFERING APPROVAL	
CATEGORY OF THE OFFERING <input type="checkbox"/> CONSUMER PROTECTION <input type="checkbox"/> ETHICS <input type="checkbox"/> AGENCY <input type="checkbox"/> MANAGEMENT AND SUPERVISION <input type="checkbox"/> CONSUMER SERVICE <input type="checkbox"/> RISK MANAGEMENT <input type="checkbox"/> FAIR HOUSING <input type="checkbox"/> SIX-HOUR SURVEY COURSE <input type="checkbox"/> EIGHT-HOUR SURVEY COURSE <input type="checkbox"/> TRUST FUNDS	EIGHT-DIGIT CalBRE APPROVAL NUMBER

SPONSOR VERIFICATION	
I hereby verify that the above participant:	
<input type="checkbox"/> Attended a minimum of 90% of the clock hours, successfully completed the live course and passed the final exam with a score of 70% or better.	
<input type="checkbox"/> Successfully completed the correspondence home/study course and passed the final exam with a score of 70% or better.	
NAME OF SPONSORING ENTITY (AS APPROVED BY CalBRE)	
ADDRESS OF SPONSORING ENTITY (STREET ADDRESS, CITY, STATE, AND ZIP CODE)	TELEPHONE NUMBER (    )
SIGNATURE OF VERIFIER ➤	PRINTED NAME OF VERIFIER
ADDRESS OF VERIFIER (STREET ADDRESS, CITY, STATE, AND ZIP CODE)	TELEPHONE NUMBER (    )

### Reminder

- CalBRE requires that the Continuing Education Course Verification (RE 251) form be used by a licensee upon license renewal, along with other necessary renewal documents.
- Credit will expire if not used within four years of the completion date.