



PREVIOUS CREDIT CERTIFICATION FORM

Name: _____ Date: _____

Firm: _____

Address: _____

Phone: _____ Email: _____

.....
Class Requesting Credit For:

Date Taken: _____ Credit Hours: _____

Class Location: _____

Signature: _____

.....
Attach the Certificate or letter that you received upon completing the above noted class or have the information below completed by the association where you took the class.

I verify that _____ completed the above noted class as indicated above.

Name: _____ Date: _____

Title: _____ Assoc: _____

Signature: _____

Return to Homes4NC via fax at 336-299-7872 or email to dgreene@ncrealtors.org
(Please allow 30 days for processing)