

**INTERVIEW INFORMATION STATEMENT**

FILE NUMBER — DRE USE ONLY

RE 515 (Rev. 9/22)

- Complete all information requested.
- Read and sign certification on page 5.
- Submit your completed Information Statement to the individual assigned to your case.
- Your completed Information Statement must be received by the Department before an interview will be scheduled in connection with your petition/license application.

NAME OF LICENSEE/APPLICANT		DATE	
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CALIFORNIA DRIVER'S LICENSE NUMBER	EXPIRATION DATE	CALIFORNIA IDENTIFICATION CARD #	EXPIRATION DATE
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US PASSPORT NUMBER

ADDRESS (STREET ADDRESS, CITY AND ZIP CODE)

TYPE OF LICENSE HELD OR APPLIED FOR  
 Sales  Broker  Officer  Mortgage Loan Originator (MLO) License Endorsement

IF LICENSED, ENTER REAL ESTATE LICENSE NUMBER	IF MLO, ENTER NMLS UNIQUE IDENTIFIER(S)	BUSINESS TELEPHONE NUMBER (      )
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ALTERNATE TELEPHONE NUMBER (      )	BUSINESS CELL PHONE NUMBER (      )	BUSINESS EMAIL ADDRESS
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LIST CITIES OF RESIDENCE DURING THE LAST FIVE YEARS

From	To	City	From	To	City

**EMPLOYMENT** - LIST ALL JOBS HELD DURING THE LAST FIVE YEARS BEGINNING WITH THE MOST RECENT. IF YOU HAVE BEEN DISMISSED, DISCHARGED OR FORCED TO RESIGN BY EMPLOYER, GIVE DETAILS BELOW.

From	To	Employer Name and Address	Employer Phone	Position

*Explanation*

**EDUCATION** - MARK THE HIGHEST LEVEL OF EDUCATION COMPLETED. LIST ANY DEGREES, SPECIAL EDUCATION OR TRAINING COURSES COMPLETED OTHER THAN PRIVATE REAL ESTATE SCHOOL GIVING EXAMINATION PREPARATION WORK.

High School Graduate or Equivalent  College Graduate  Graduate School  Other (Explain)

**FAMILY - CHECK THE APPROPRIATE BOX(ES) BELOW**

Married  Divorced  Married More Than Once  Separated  Single  Domestic Partner

DO YOU HAVE CHILDREN?

Yes  No If Yes, list how many and their ages.

**COMMUNITY GROUPS - ARE YOU ACTIVE IN SOCIAL, CIVIC, OR COMMUNITY GROUPS?**

Yes  No If Yes, describe the group and your extent of activity and provide contact information.

**PROPERTY OWNED - CHECK THE APPROPRIATE BOX(ES) BELOW**

Own home  Own other real property (describe below)  Own car  Own other property of substantial value (describe below)

**PAST DUE DEBTS - DO YOU HAVE ANY PAST DUE DEBTS, LIENS, JUDGEMENTS, OUTSTANDING JUDGEMENTS SETTLED, OR BANKRUPTCY ACTION PENDING?**

Yes  No If Yes, explain below in detail or on an attachment if necessary.

**CIVIL COURT - HAVE YOU OR ANY ENTITY IN WHICH YOU HAD OWNERSHIP, HELD AN OFFICER TITLE, OR EXERCISED CONTROL EVER BEEN A DEFENDANT IN A CIVIL COURT ACTION, INCLUDING SMALL CLAIMS ACTIONS?**

Yes  No If Yes, list the court name, date, and a brief description of the lawsuit.

<i>Name of Court</i>	<i>Date</i>	<i>Docket/Case #</i>	<i>Brief Description of Suit</i>

DID ANY OF THE ABOVE CASES RESULT IN A JUDGMENT FOR FRAUD, MISREPRESENTATION, DISHONESTY, DISHONEST DEALING, AND/OR MISHANDLING OF TRUST FUNDS? IF YES WERE ANY PUNITIVE AND/OR EXEMPLARY DAMAGES AWARDED AGAINST YOU?

Yes  No

**LICENSE/REGISTRATION** - DO YOU HOLD OR HAVE YOU EVER HELD ANY KIND OF PROFESSIONAL LICENSE, CERTIFICATE, CREDENTIAL, OR REGISTRATION ("LICENSE") IN THIS STATE OR ANY OTHER STATE?

Yes  No If Yes, complete below.

Name of State	License Type	ID Number	Date Issued	Current Status

**LICENSE/REGISTRATION DISCIPLINE** - HAVE YOU EVER SUFFERED LICENSE, CERTIFICATE, CREDENTIAL, OR REGISTRATION ("LICENSE") DISCIPLINE OR HAD AN ORDER ENTERED AGAINST YOU IN A LICENSED OR UNLICENSED CAPACITY IN THIS STATE OR ANY OTHER STATE?

Yes  No If Yes, complete below.

Name of State	License Type	ID#	File #	Eff. Date	Cause	Current Status

*Explanation*

**BONDS** - HAVE YOU EVER BEEN BONDED?

Yes  No If Yes, list the position, coverages, amount of bond, individual or blanket bond and if any claims ever made.

**SUBSTANCE ABUSE** - DOES YOUR RECORD INDICATE A SUBSTANCE ABUSE (E.G. ALCOHOL) OR GAMBLING PROBLEM?

Substance Abuse or Gambling Problem:  Yes  No

If Yes, state any particular reason for it. If treatment has been obtained, list who, what, where, and how long. If you are now or have ever been a member of AA, NA or GA, state how long and how active, etc.

**MENTAL PROBLEMS** - HAVE YOU EVER BEEN A PATIENT OR INMATE OF A DEVELOPMENTAL OR MENTAL HOSPITAL, EVER BEEN DECLARED OR DIAGNOSED AS MENTALLY ILL, OR ADJUDGED WARD OF A COURT, OR TO BE INSANE, INCOMPETENT, OR A DIPSOMANIAC?

Yes  No If Yes, explain below.



