

# Wisconsin Department of Safety and Professional Services

Office Location: 4822 Madison Yards Way  
 Madison, WI 53705  
 Phone Number: (608) 266-2112

LicensE Portal: [License.wi.gov](http://License.wi.gov)  
 Email: [dsps@wisconsin.gov](mailto:dsps@wisconsin.gov)  
 Website: <http://dsps.wi.gov>

## REAL ESTATE EXAMINING BOARD

### ADDENDUM TO BROKER LICENSE APPLICATION

**INSTRUCTIONS:** Form 3036 verifies the required experience for a *Broker initial license application*. (**IMPORTANT NOTE:** To add or change an association with a firm see [Form 812](#).) **Include your PAR with your applicant signature below.** Locate your Preliminary Application Reference (PAR) number by logging in to your [LicensE](#) account and clicking “checking application status.”

Last Name	First Name	MI	Former / Maiden Name(s)

**EXPERIENCE REQUIREMENTS:** (Check **one** set of experience requirements and provide documentation as indicated.)

- I am licensed to practice law in Wisconsin and have attached evidence of my real estate experience to this form.
- I hold a current certificate of financial responsibility under Wis. Stat. § [101.654](#) and have attached evidence of my real estate sales experience to this form.
- I am a reciprocal applicant with a current Broker’s license in Illinois or Indiana and will request a license verification to be submitted to the Department of Safety and Professional Services (DSPS) as a requirement of this application.
- I am an endorsement applicant and have been licensed as a Broker in another state for at least two (2) years within the last four (4) years preceding the date of this application. I will request a license verification to be submitted to the Department of Safety and Professional Services as a requirement of my broker application.
- I am an examination applicant who has never held a Broker’s license, **or** I do not qualify for other experience listed above. I have practiced as a licensed Salesperson under the direct supervision of a licensed Broker for at least two (2) years within the last four (4) years preceding the date of this application. Document experience below and forward form to your Supervising Broker to verify your experience\*. The Supervising Broker will upload the signed form into your [LicensE](#) application using your PAR.

**\*Document at least 40 points of experience to be eligible for a Broker’s license. Attach additional sheets if necessary.**

**Note:** If experience was completed with more than one Supervising Broker **complete a separate form** for each Supervising Broker.

• Each completed/closed residential transaction – <b>5 points</b>	• Each property management contract – <b>0.5 points/month</b>
• Each completed/closed commercial transaction – <b>10 points</b>	• Each completed/closed timeshare – <b>1 point</b>

Type of Transaction	Role in Transaction	Property Address	Date Completed/Closed	Points
Ex: Residential, single-family home	Worked with seller	111 Main Street, Hometown, WI, Zip	1/1/2014	5
<b>TOTAL POINTS:</b>				

**APPLICANT: BY SIGNING BELOW, I ATTEST ALL INFORMATION PROVIDED ABOVE IS TRUE.**

Applicant Signature (Provide a digital signature or print and sign form.)	PAR NUMBER	Date
	PAR- _____	__ / __ / ____

**Supervising Broker: Review the information above and continue to Page 2.**

# Wisconsin Department of Safety and Professional Services

**Supervising Broker:** Complete this section for the above-named applicant and upload from directly into the Department License Third-Party Portal at [license.wi.gov](https://license.wi.gov). The **PAR number** shown above is needed. (For upload assistance see information below.)

I, \_\_\_\_\_, with broker's license number \_\_\_\_\_, have supervised the licensed salesperson practice of applicant \_\_\_\_\_ with real estate salesperson license number \_\_\_\_\_, in accordance with Wisconsin statutes and rules governing the practice of Real Estate, for at least 2 years within the last 4 years preceding the date of a broker application.

**Supervising Broker Signature** (Provide a digital signature or print and sign form.)

**Date**

□□/□□/□□□□
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**Daytime Phone Number** (with area code)

□□□ - □□□ - □□□□	Ext: _____
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How to request assistance:

1. Go <https://license.wi.gov>.
2. Select "Request Support" from the blue toolbar.
3. Select "Create New Ticket."
4. Complete and submit "Create New Ticket" online form.