

OKLAHOMA REAL ESTATE COMMISSION
CED ATTENDANCE LIST

PRINT OR TYPE

School ID # _____ School Name _____

Course Date _____ Title _____

Category & Course Number _____ Required Hours _____ Elective Hours _____

Instructor _____
Name License Number Instructor Number

DO NOT SIGN THIS FORM IF YOU ARE A PROVISIONAL SALES ASSOCIATE

Real Estate License Number	Licensee's Name - Please Print (Last, First)	Telephone Number
-------------------------------	---	---------------------

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____

IF THE ABOVE INFORMATION IS INCORRECT OR ILLEGIBLE IT IS POSSIBLE THAT YOU MAY NOT BE GIVEN CREDIT.