



Greater Idaho Falls Association of REALTORS®

Agent Status Change Form

(As of February 22, 2022)



INSTRUCTIONS:

Entering the information on the Idaho Real Estate Commission’s website does **not** inform the Greater Idaho Falls Association of REALTORS® (The “Association”) of a change and, therefore, does not allow for the Greater Idaho Falls Association of REALTORS® to accurately account for our members. Brokers are responsible for ensuring the accuracy and current status of their Agents. In the event of an Agent transfer, we **MUST** be notified by completing and signing this form to ensure that accurate records are maintained.

Notification of New Agents, Release of Agents and Transfers

The designated broker shall notify the Association of any change in status of personnel, structure of organization, name change or additions to their licensed staff within thirty (30) calendar days of such change utilizing an “Agent Status Change Form” which will be signed by the designated broker. Failure to make notification within the designated period will result in a \$25 fine.

In accordance with bylaws Article V, Section 6a, a REALTOR® member who changes the conditions under which he holds membership (e.g. agent to broker) shall be required to provide written notification to the Association within 30 days. A REALTOR® who is transferring their license from one firm to another shall complete all the requirements of the Bylaws and Association within 10 days. Membership will terminate automatically if these deadlines are not met, unless otherwise so directed by the Board of Directors.

Name of Licensee: _____ (type it as it appears on the License)
License Number of Licensee: _____ **Date of Change:** _____
NRDS # _____

CHANGE FROM (Complete only those items that will be changing)	CHANGE TO (Complete only those items that will be changing)
License Type: <input type="checkbox"/> Sales Associate Status: <input type="checkbox"/> Active <input type="checkbox"/> Broker <input type="checkbox"/> Inactive <input type="checkbox"/> Assoc. Broker <input type="checkbox"/> Provisional <input type="checkbox"/> Designated Broker <input type="checkbox"/> Other <input type="checkbox"/> Branch Manager <input type="checkbox"/> LFRO <input type="checkbox"/> Licensed Assistant	License Type: <input type="checkbox"/> Sales Associate Status: <input type="checkbox"/> Active <input type="checkbox"/> Broker <input type="checkbox"/> Inactive <input type="checkbox"/> Assoc. Broker <input type="checkbox"/> Provisional <input type="checkbox"/> Designated Broker <input type="checkbox"/> Other <input type="checkbox"/> Branch Manager <input type="checkbox"/> LFRO <input type="checkbox"/> Licensed Assistant
Firm Name:	Firm Name:
Designated Broker:	Designated Broker:
Address:	Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:

_____ **Current/Releasing Broker / Date** _____ **New/Accepting Broker / Date** _____ **Licensee (if available) / Date**