

**COOPERATIVE ARKANSAS REALTORS®  
MULTIPLE LISTING SERVICES, INC.  
(CARMLS)**

**PARAGON TRAINING WAIVER**

**Date:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_ ("Company")

**Waiver Request For:** \_\_\_\_\_ ("Individual")

Individual hereby requests waiver of Paragon training.

Individual acknowledges that, upon waiver approval, CARMLS is not responsible for customer service support for individual for the duration of the waiver or until such time as individual attends the Paragon training.

\_\_\_\_\_  
**Typed/Printed Name of Individual**

\_\_\_\_\_  
**Signature of Individual**

I acknowledge, and therefore give permission, for said Individual to be waived from Paragon training as stated herein.

\_\_\_\_\_  
**Typed/Printed Name of Broker/Designated REALTOR®**

\_\_\_\_\_  
**Signature of Broker/Designated REALTOR®**

CARMLS, INC.

By: \_\_\_\_\_ / \_\_\_\_\_  
**CARMLS Representative                      Accepted              Denied**