

Real Estate Appraiser Board
PRE-LICENSE EDUCATION COURSE APPLICATION
Fee \$150.00

A check or money order payable to the **TREASURER OF VIRGINIA**,
 or a completed [credit card insert](#) must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

1. Course Provider Name _____
2. Provider's Federal Employer Identification Number [❖]

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[❖] State law requires every applicant, *who is not a sole proprietor*, to provide a federal employer identification number.
3. Mailing Address (PO Box accepted) _____
 The mailing address will be printed on the license. _____

 City _____ State _____ Zip Code _____
4. E-mail Address _____
5. Name of Course Appraiser _____
6. Contact Number _____
 Primary Telephone
7. Type of Institution
☐ Proprietary School
☐ Real Estate or Real Estate Appraisal Organization
8. Course Title _____
9. Course Delivery Type
☐ Classroom ☐ On-line [♦]
☐ Correspondence [♦] ☐ Other Distance Learning [♦] _____
[♦] On-line, Correspondence and Other Distance Learning courses must include International Distance Education Certification Center (IDECC) approval.
10. Is this an AQB Approved Course?
 No ☐
 Yes ☐ If yes, attach the AQB Approval Letter to this application.
11. Full Name Board-Certified Instructor _____

All pre-license courses must be taught by an Instructor certified by the Virginia Real Estate Appraiser Board. All 15-hour USPAP courses must be taught by an AQB certified USPAP® instructor. The USPAP Instructor Certification and the instructor's AQB Certification must be included with the application.

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE # / LICENSE #	ISSUE DATE
			1020		4006	

12. Grading information (state final examination requirements)

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13. Course Length

Number of Meetings _____

Hours per Meeting _____

Meetings per Week _____

Total Course Hours _____

14. *I, the undersigned, certify that the foregoing statements and answers are true, and that I have not suppressed any information that might affect the Board's decision to approve this application.*

Signature _____

Course Administrator's Signature

Date _____

REQUIRED ATTACHMENTS:

Label each attachment according to the number listed below.

Attachment #1 - A Comprehensive Timed Course Outline

Attachment #2 - Instructor's Resume, AQB Certification, and USPAP Instructor Certification

Attachment #3 - A Course Syllabus

Attachment #4 - A list of books, pamphlets, and materials to be used by the instructor and students

Attachment #5 - A copy of the Course Final Examination