

Real Estate Appraiser Board
PRE-LICENSE EDUCATION COURSE RENEWAL 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. Course Title _____
4. Virginia Course License Number:

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5. Mailing Address (PO Box accepted) _____
The mailing address will be printed on the license. _____
City _____ State _____ Zip Code _____
6. Email Address _____
7. Name of Course Administrator _____
8. Contact Number _____
Primary Telephone _____
9. Type of Institution
 - Proprietary School
 - Real Estate or Real Estate Appraisal Organization
10. 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.
11. Is this an AQB Approved Course?
 - No
 - Yes If yes, attach the AQB Approval Letter to this application.
12. 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 this application.

OFFICE USE ONLY	DATE	FEES	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			2020		4006	

13. Grading information (state final examination requirements)

14. Course Prerequisites (if any)

15. Course Length

Number of Meetings _____

Hours per Meeting _____

Meetings per Week _____

Total Course Hours _____

16. *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 _____ Date _____
Course Administrator's Signature

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 #4 - A copy of the Course Final Examination