

Commonwealth of Virginia
 Department of Professional and Occupational Regulation
 Post Office Box 29570
 Richmond, Virginia 23242-0570
 (804) 367-2039
www.dpor.virginia.gov



**Real Estate Appraiser Board
 TRAINEE SUPERVISOR VERIFICATION FORM**

Pursuant to the *Real Estate Appraiser Board Regulations*, an Appraiser Trainee must be supervised by one or more Virginia Certified Real Estate Appraisers in good standing. This TRAINEE SUPERVISOR VERIFICATION FORM may be submitted with the TRAINEE LICENSE APPLICATION or after passing the examination.

Photocopies of this form may be made to accommodate multiple supervisors.

APPLICANTS: PLEASE COMPLETE #1 & #2.

1.	Name	<div style="display: flex; justify-content: space-between; font-size: small;"> First Middle Last </div>	<div style="font-size: small;">Generation (SR, JR, III, etc.)</div>
2.	I, the undersigned, certify that the statements and answers contained in my Appraiser Trainee License Application are true. I also certify that I understand, and have complied with, all the laws of Virginia related to Real Estate Appraisers under the provisions of Title 54.1, Chapter 20.1 of the <i>Code of Virginia</i> , the <i>Real Estate Appraiser Board Regulations</i> and the <i>Uniform Standards of Professional Appraisers Practice</i> ©.		
	Signature	Date	

THE APPLICANT'S SUPERVISOR MUST COMPLETE #3 THROUGH #16.

3.	Name	<div style="display: flex; justify-content: space-between; font-size: small;"> First Middle Last </div>	<div style="font-size: small;">Generation (SR, JR, III, etc.)</div>
4.	Social Security Number *	<div style="display: flex; justify-content: space-around; font-size: small;"> [] [] [] - [] [] - [] [] [] [] </div>	
5.	Date of Birth		
6.	Home Street Address (PO Box <u>not</u> accepted)		
	City, State, Zip Code		
7.	Mailing Address (PO Box accepted)		
	City, State, Zip Code		
8.	E-mail Address		
9.	Telephone & Facsimile Numbers	<div style="display: flex; justify-content: space-around; font-size: small;"> () - </div>	<div style="display: flex; justify-content: space-around; font-size: small;"> () - </div>
		Telephone	Facsimile
10.	VA Real Estate Appraiser License Number	4 0 0 1	
11.	Type of Virginia Real Estate Appraiser License		
	Certified General	<input type="checkbox"/>	
	Certified Residential	<input type="checkbox"/>	
12.	Business Name		
13.	Trade Name of Business		

14. Business Street Address (no PO Boxes) _____
City, State, Zip Code _____

15. Business Telephone and Facsimile Numbers () - () -
Telephone Facsimile

16. VA Appraiser Business Registration Number 4 0 0 8
(if applicable)

17. I, the undersigned, certify that the foregoing statements and answers are true. I also certify that I understand, and have complied with, all the laws of Virginia related to Real Estate Appraisers under the provisions of Title 54.1, Chapter 20.1 of the *Code of Virginia*, the *Real Estate Appraiser Board Regulations* and the *Uniform Standards of Professional Appraisers Practice*®.

Signature _____ Date _____

* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.