

Real Estate Appraiser Board
PRE-LICENSE EDUCATION COURSE RENEWAL APPLICATION
Fee \$25.00

**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 Advanced Level Appraisal Course?
 No
 Yes
12. Is this an AQB Approved Course?
 No
 Yes If yes, attach the AQB Approval Letter to this application.
13. 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.

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

14. Grading information (state final examination requirements)

15. Attendance Policy (must be 100%)

16. Course Prerequisites (if any)

17. Course Length

Number of Meetings _____

Hours per Meeting _____

Meetings per Week _____

Total Course Hours _____

18. Promotion Used *

* If advertising is used, submit copies of advertisements and brochures.

19. *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 - A Course Syllabus

Attachment #3 - A list of books, pamphlets and materials to be used by the instructor and students.

Attachment #4 - A copy of the Course Final Examination