Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-2039
www.dpor.virginia.gov



Real Estate Appraiser Board PRE-LICENSE EDUCATION COURSE RENEWAL APPLICATION Fee \$135.00

A check or money order payable to the <u>TREASURER OF VIRGINIA</u>, or a completed <u>credit card insert</u> must be mailed with your application package.

		APPLICA	TION FEES ARE NO	OT REFUNDABLE.			
1.	Course Provider Name						
2.	Provider's Federal Employer Id State law requires every applicant,			- Ederal employer identification number	er.		
3.	Course Title						
4.	Virginia Course License Number	er:	4 0 0 6				
5.	Mailing Address (PO Box accepted)						
	If a mailing address is submitted, the address will be printed on the lice						
			City		State	Zip Code	
6.	Email Address						
7.	Name of Course Administrator						
8.	Contact Number	D	-i				
9.	Type of Institution	ГІ	rimary Telephone				
,.	☐ Proprietary School						
	☐ Real Estate or Real Esta	ate Appraisal	Organization				
10.	Course Delivery Type						
	☐ Classroom ☐ On-line •						
	 □ Correspondence						
	 On-line, Correspondence at (IDECC) approval. 	nd Other Dista	nce Learning course	s must include International Dis	stance Education Ce	rtification Center	
11.	Is this an Advanced Level Appr	raisal Course	 ??				
	No						
	Yes						
12.	Is this an AQB Approved Course?						
	No	ho A∩P Ann	oroval Letter to this	application			
13.	Full Name Board-Certified Insti	• • • • • • • • • • • • • • • • • • • •	TOVAL LELLEL TO LITE	аррисации.			
13.	All pre-license courses must b		an Instructor certi	 fied by the Virginia Real F		 Roard ΔII 15.	
	hour USPAP courses must be				-state Applaiser t	Juaiu. Ali 13-	
OFFICE	DATE FEE	TRANS CODE	ENTITY#	FILE #/LICENSE	#	ISSUE DATE	
USE ONLY		2020		4006			
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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 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 - 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