



State of Rhode Island and Providence Plantations
DEPARTMENT OF BUSINESS REGULATION
1511 Pontiac Avenue, Bldg. 69-1
Cranston, Rhode Island 02920

Division of Commercial Licensing and
Racing and Athletics
Real Estate Appraisers Section

EDUCATION COURSE APPROVAL REQUIREMENTS

All course materials mentioned below must be submitted on a FLASH DRIVE. All paper submissions will be returned. There is a non-refundable fee of \$25 for each course submission.

- All courses must relate to the real estate appraisal industry.
- All course descriptions and subject matter outlines must be submitted with the application. The outline **MUST** include the time spent on each topic.
- All texts and materials used in teaching the course (i.e. text book, handouts, power point presentations, etc.).
- A copy of the examination and answer key (a written proctored examination is required for **all** qualifying education course offerings).
- Instructor's qualifications/resume.
- A copy of the AQB certification, if applicable.
- For Distance Education – A copy of the certification from the International Distance Education Certification Center (IDECC).
- A copy of the certificate of completion for the course.
- A copy of the secondary provider permission letter if you aren't the primary course provider.

USPAP INSTRUCTOR REQUIREMENTS

All instructors teaching USPAP courses shall at minimum meet the following criteria:

- At least 7 years of appraisal experience in any discipline, and
- At least 35 classroom hours of appraisal teaching experience within the last 5 years.
- A copy of the AQB Certified USPAP Instructor certification for the version to be taught.
- Instructor **MUST** be an active certified appraiser.



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APPLICATION FOR EDUCATION COURSE APPROVAL

Please print or type. List **ONE** course per form. **\$25.00** fee – Check made payable to RI General Treasurer

SECTION I: COURSE PROVIDER INFORMATION

Name of Provider: _____
Address: _____ <div style="text-align: center; margin-top: -10px;">Street Address</div> <hr/> <div style="display: flex; justify-content: space-between;"> City State Zip </div> <hr/> <div style="display: flex; justify-content: space-between;"> Telephone No. Web Address </div>
Coordinator's Name: _____
Coordinator's E-mail: _____

SECTION II: COURSE INFORMATION

Course type: <input type="checkbox"/> Qualifying Education <input type="checkbox"/> Continuing Education <input type="checkbox"/> Both		
Method of delivery: <input type="checkbox"/> Seminar <input type="checkbox"/> Conference <input type="checkbox"/> On-Line <input type="checkbox"/> Classroom <input type="checkbox"/> Other _____		
Course Title: _____		
Course Length: _____	Start Date: _____	End Date: _____
Is the Course AQB approved? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is the Course IDECC Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is there an examination associated with this course? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes', provide exam/answer key.		

SECTION III: INSTRUCTOR INFORMATION

Instructor's Name: _____
Is the Instructor AQB approved? <input type="checkbox"/> Yes <input type="checkbox"/> No (If you answered Yes, please provide a copy of the USPAP certification for the instructor(s).)
Does the Instructor have an active certified appraiser license? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does the Instructor have the requisite appraisal experience and teaching experience? <input type="checkbox"/> Yes <input type="checkbox"/> No

OFFICIAL USE ONLY

Course No.:	Expiration Date:
Date Reviewed by Board:	Rejected Date:
Date Reviewed by Dept.:	Reason for Denial:
Date of Approval:	

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