



ARIZONA DEPARTMENT OF FINANCIAL INSTITUTIONS
REAL ESTATE APPRAISAL DIVISION

Lauren W. Kingry
Superintendent of Financial Institutions

Douglas A. Ducey
Governor

REQUIREMENTS FOR SUBMITTING AN APPLICATION FOR
COURSE APPROVAL APPLICATION

All entries must be typewritten or printed in ink. All new course applications must be submitted electronically and a hard copy must be submitted to the Board's office. If you do not answer **EVERY** question, and include all required attachments, your application will be considered incomplete and will delay the course approval.

Payment must be in the form of a certified check, cashier's check or money order payable to the Arizona Board of Appraisal. Do not send cash, personal check or business check. Cash will be accepted in exact amount if presented in person at the Board office.

Initial Course Approval:

Submit electronically (email or CD) or submit a hard copy to the Boards office.

1. Fees
 - a. \$400.00 Qualifying Education
 - b. \$200.00 Continuing Education
2. Course approval application. Include all required documentation.
3. If not previously approved as an Instructor for our Agency, please provide a completed Instructor approval application and provide documentation as requested in the application.
4. School and/or Course Supplier's application if the course supplier does not currently have a course approved by the Board.
5. Detailed course **timed** outline.
6. The text or other written materials.
7. Topic Matrix. **Required for qualifying education courses only.** Complete and submit only the page(s) that are applicable to the course.
8. If course was approved by Appraiser Qualification Board Course Approval Program (AOB CAP), please provide a copy of their approval letter.
9. If course is to be an online or distance education class, please provide the International Distance Education Certification Center (IDECC) Distance Education Certification. **The course title and Provider Certification must match the name of the Secondary Provider/Applicant submitting the course to the Program for approval**

Renewal of Course Approval:

Submit electronically (email or CD) or submit a hard copy to the Boards office.

1. Fees
 - a. \$100.00 Qualifying OR Continuing Education
2. Course approval application. Course material is not required to be submitted. If there are substantive changes, the course is no longer a renewal. Refer to instructions for an Initial Course Application.
3. If not previously approved as an Instructor for our Agency, please provide a completed Instructor approval application along with the required documentation as listed on the Instructor's application.
4. Detailed course **timed** outline.
5. Topic Matrix. **Required for qualifying education courses only.** Complete and submit only the page(s) that are applicable to the course.

ADDITIONAL INFORMATION:

1. Qualifying education courses must be at least fifteen (15) hours in duration with an exam for licensing or certification. Continuing education must be at least three (3) hours in duration.
2. All courses approved for qualifying education may also be used for continuing education.
3. The 15-hour National USPAP Course, or its equivalent, approved through the AQB Course Approval Program, cannot be through distance education.
4. The 7-hour National USPAP Update Course, or its equivalent, approved through the AQB Course Approval Program, cannot be through distance education.
5. The American Council on Education through its ACE/Credit Program IS NOT an approved entity for review of distance learning education course mechanisms.
6. It is the responsibility of the course provider to maintain and submit approval/renewal of the course design and delivery mechanism. If an approved AQB and/or IDECC course expires prior to the Boards expiration date, the course will be removed from the Boards Education list as of the AQB and/or IDECC date of expiration. To avoid this removal, please provide any updated AQB and/or IDECC renewal approval letters when received..
7. Course supplier must maintain a record of attendance for a minimum of five years which indicates:
 - (a) Name of participant
 - (b) Hours the participant attended the course/seminar
 - (c) Title and description of the course/seminar attendedThese records may be inspected by the Board or its representative.
8. Classes may be monitored at any time by the executive director or the executive director's representative. No fee may be charged to anyone acting in this capacity.
9. A course may be instructed by only the Board-approved instructor(s) for the course.



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APPLICATION FOR COURSE, INSTRUCTOR, OR SUPPLIER APPROVAL

If you do not answer every question, and include all required attachments, your Application will be considered incomplete and will delay the course approval.

Check **Applicable Boxes**

INITIAL Course Review
 \$400 Fee for QUALIFYING Education \$200 Fee for CONTINUING Education
 RENEWAL of Course Approval
 \$100 Renewal Fee for QUALIFYING Education \$100 Renewal Fee for CONTINUING Education
 CHANGE/ADD INSTRUCTOR(S) to a Currently Active Approved Course
 \$50 Fee to CHANGE INSTRUCTOR(S) With No Other Changes

Fees: Submit a cashier's check, certified check or money order payable to the Department of Financial Institutions. Do not send personal or business checks. Fees are nonrefundable.

THIS FORM MUST BE COMPLETED FOR EACH OF THE FOLLOWING, AS APPLICABLE:

Owner Administrator Director

Name _____
Course Provider _____
Mailing Address _____
City _____ County _____ State _____ Zip _____
Contact Person Phone _____
Email _____ Fax _____
Website _____

NOTE: The information provided above will be posted on the Division website as contact for public information.

Course Title _____
Course Approval Code (for renewal only) ABA # _____
Course Hours (not including exam hours) _____ Exam Hours (exam hours only) _____ Total Hours _____
Name of New Instructor(s): _____
 Instructor Application included with course application [page 3] Instructor change only
Name of Currently Approved Instructor(s): _____

In accordance with Title II of the "Americans with Disabilities Act" this information is available in alternative format.

Location of Offering _____

Course approved through the AQB Course Approval Program? No Yes (if yes, attach proof)

Method of Presentation: Traditional Classroom Correspondence Internet
 Video tape Remote TV Computer

Attach proof of approval of the course design and delivery mechanism from one of the following sources:

- The Appraiser Qualifications Board (AQB).
Effective Date: _____ Expiration Date: _____
- The International Distance Education Certification Center (IDECC).
Effective Date: _____ Expiration Date: _____
- An accredited college, community college, or university that offers distance education programs in other disciplines and is approved or accredited by the Commission on Colleges, a regional or national accreditation association, or by an accrediting agency that is recognized by the U.S. Secretary of Education, that awards academic credit for distance education courses.
- A qualifying college for content approval with a distance education delivery program that approves the course design and delivery that incorporates interactivity.

Ownership of Course Materials: Yes No (If no, list owner and contact information)

Owner: _____

Check all items submitted with this course application:

- Detailed timed outline Text or other written materials Topic matrix (required with qualifying education)
- Instructors Application (with attachments) Course Supplier (with attachments)

NEW IMPORTANT: Submit electronically (email or CD) as well as a hard copy to the Division office.

I declare that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation.

Print Name

Signature

Title

Date

COURSE SUPPLIER INFORMATION/VERIFICATION

Professional Licenses or Certifications:

Type	State	Date Issued
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever had a diploma, credential, certificate or license denied, revoked or suspended?
_____ Yes _____ No If yes, append a detailed explanation.

Teaching or Job-Related Experience:

Institution	Address	Subject	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

VERIFICATION

I have reviewed the qualifications of the proposed Owner, Administrator or Director and also the statements contained in this application. To the best of my knowledge and belief this person is qualified for the indicated position.

Printed Name

Signature

Date

INSTRUCTOR INFORMATION/VERIFICATION [Attach a current resume]

Check all that apply. Provide proof of one or more of the following requirements:

- _____ A baccalaureate degree in any field and three years of experience directly related to the subject matter to be taught.
- _____ A master's degree in any field and two years of experience directly related to the subject matter to be taught.
- _____ A baccalaureate degree in a field that is directly related to the subject matter to be taught and one year of experience directly related to the subject matter to be taught.
- _____ An associate degree in a field that is directly related to the subject matter to be taught and three years of experience directly related to the subject matter to be taught.
- _____ A masters or higher degree in a field that is directly related to the subject matter to be taught.
- _____ Five years of real estate appraisal teaching experience directly related to the subject matter to be taught.
- _____ Seven years of real estate appraisal experience directly related to the subject matter to be taught.
- _____ The national USPAP courses must be taught by an AQB certified USPAP instructor and equivalent USPAP courses must be taught by an instructor approved by the AQB.

Have you ever had a diploma, certificate, credential, certification or license denied, revoked or suspended:
_____ Yes _____ No If yes, attach a detailed explanation.

VERIFICATION

I hereby verify under penalty of law that all information contained herein is true to the best of my knowledge and belief. I certify that I have not been convicted of a felony or any misdemeanor involving dishonesty or moral turpitude or entered a plea of guilty or nolo contendere (no contest) in the state of Arizona or any other state within the last ten years.

Print Name

Signature

Date