



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  
INSTRUCTOR 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.

**FEES:**

\$50.00 Change of instructor ONLY.

\$0. There is no fee due if submitted with a renewal or initial course application.

Make certified check, cashier's check or money order payable to the Department of Financial Institutions. Do not send cash, personal check or business check.

**If Only Instructor Change:** if a course provider wishes to use an instructor other than the instructor approved by the Division as part of the initial course approval, the course provider must apply to the Division for approval of any new or substitute instructor and pay the applicable fee. Any new or substitute instructor must meet Division's instructor qualifications.

**Instructors Application:**

**Submit electronically (email or CD) as well as a hard copy to the Divisions office**

1. Instructor's application signed by the instructor.
2. Instructor's resume.
3. Proof of one or more requirements as listed under question #9.
4. Documentation regarding a "Yes" answer to question #11.
5. Fees if applicable.



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

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**

<input type="checkbox"/> <b>INITIAL</b> Course Review	<input type="checkbox"/> \$400 Fee for <b>QUALIFYING</b> Education	<input type="checkbox"/> \$200 Fee for <b>CONTINUING</b> Education
<input type="checkbox"/> <b>RENEWAL</b> of Course Approval	<input type="checkbox"/> \$100 Renewal Fee for <b>QUALIFYING</b> Education	<input type="checkbox"/> \$100 Renewal Fee for <b>CONTINUING</b> Education
<input type="checkbox"/> <b>CHANGE/ADD INSTRUCTOR(S)</b> to a Currently Active Approved Course	<input type="checkbox"/> \$50 Fee to <b>CHANGE INSTRUCTOR(S)</b> 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): \_\_\_\_\_

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