

NATIONAL ASSOCIATION OF REALTORS®

APPRAISAL DESIGNATIONS PROGRAM - OFFICIAL APPLICATION

I am applying for the designation: _____ RAA _____ GAA _____ RAA/GAA

Please type or print all information. If additional space is needed attach a separate sheet.

SECTION I: APPLICANT INFORMATION

Check One: MR. MRS. MS.

First Name Middle Initial Last Name

If you would prefer your name to be listed in a different manner than above (first name, middle initial, last name) on your designation certificate, please indicate below:

Mailing Address:

Firm Name _____

Address _____

City _____ State _____ Zip Code _____

Daytime Phone No. _____ / _____ Fax No. _____ / _____

E-mail address: _____

SECTION II: ASSOCIATION INFORMATION

Designation Criteria: You must be an active member of the NATIONAL ASSOCIATION of REALTORS®. (This includes Institute of Real Estate Management (IREM), Commercial Real Estate Institute (CCIM), REALTORS® Land Institute (RLI), Society of Industrial and Office REALTORS® (SIOR), and the Counselors of Real Estate (CRE).)

◆ I am currently a member in good standing of the following Primary Board/Local Association:

Membership Status: REALTOR® Institute Affiliate: IREM, CCIM, RLI, SIOR, or CRE
Which Designation(s) do you possess? (Please circle)
ALC CCIM CPM CRE SIOR

Attached is the required letter from the Local Board/Association which verifies my REALTOR® or Institute Affiliate (with IREM, CCIM, RLI, SIOR or CRE) membership status. This letter must be included for application processing.

SECTION III: APPRAISAL CERTIFICATION INFORMATION

Designation Criteria: You currently must be state certified. If your state does not have a certified residential classification, please contact us.

	State	License Number	Expiration Date
Licensed			
Certified Residential			
Certified General			

Attached is a copy of the state appraisal certificates listed above. (Where photocopying of a state certificate is prohibited, please submit adequate proof of certification.)

SECTION IV: PRIMARY WORK ACTIVITY INFORMATION

Using the past 12 months as the timeline, please indicate, in percentages, how your time was spent in the following real estate appraisal categories. The total should equal 100%

- | | | | |
|--|---------|--|--------------|
| <input type="checkbox"/> Residential | _____ % | <input type="checkbox"/> Agriculture | _____ % |
| <input type="checkbox"/> Commercial | _____ % | <input type="checkbox"/> Industrial | _____ % |
| <input type="checkbox"/> Acreage/Large Land Tracts | _____ % | <input type="checkbox"/> Public Utilities | _____ % |
| <input type="checkbox"/> Mobile Home Parks | _____ % | <input type="checkbox"/> Retail | _____ % |
| <input type="checkbox"/> Wetlands | _____ % | <input type="checkbox"/> Urban Development | _____ % |
| <input type="checkbox"/> Other: _____ | _____ % | <input type="checkbox"/> Non-Appraisal | _____ % |
| _____ | _____ | TOTAL: | <u>100</u> % |

SECTION V: APPRAISAL EMPLOYMENT INFORMATION

Designation Criteria: Describe all employment during the past five years; list present employment first. Attach additional sheets if necessary.

Name of Company		City	State
Phone ()	Position	From (Month/Year)	To (Month/Year)
Name of Company		City	State
Phone ()	Position	From (Month/Year)	To (Month/Year)

SECTION VI: EDUCATION INFORMATION

Designation Criteria: You must have enough education hours to satisfy the Appraiser Qualification Board's (AQB) education requirements at the time of certification plus an additional 45 **tested** hours to qualify for the RAA designation or 60 **tested** hours to qualify for the GAA designation.

- 1) Date of initial state certification: _____
- 2) Education Requirement:
 - RAA Designation:
 - Certified prior to January 1, 1994 - **150 hours (105 hours submitted for certification plus an additional 45 hours of tested education)**
 - Certified on or after January 1, 1994 - **165 hours (120 hours submitted for certification plus an additional 45 hours of tested education)**
 - GAA Designation or Both Designations - **225 hours (165 hours submitted for certification plus an additional 60 hours of tested education)**
- 3) Substantiate the required number of education hours indicated above using the log on the following page. Guidelines for the additional education required beyond certification to attain the designation include: 1) 45 hours of successfully tested education for the RAA designation or 60 hours of successfully tested education for the GAA designation, and 2) the subject matter should relate to the appraisal qualifying or continuing education topics identified by the Appraiser Qualifications Board of The Appraisal Foundation and which are listed below. Credit toward the designation may also be awarded for instructing or writing appraisal courses as well as for successful challenge examinations. (These should be noted and highlighted on the education log.) **You can obtain credit for a course only once, whether it is for attending, writing or instructing a course.** The Appraisal Designations Admissions Panel makes the determination as to whether submitted courses constitute acceptable education for the designations program.

AQB APPROVED APPRAISAL SUBJECT MATTER TOPICS

Qualification Topics:

- a) Influences on Real Estate Value
- b) Legal Considerations in Appraisal
- c) Types of Value
- d) Economic Principles
- e) Real Estate Markets and Analysis
- f) Valuation Process
- g) Property Description
- h) Highest and Best Use Analysis
- i) Appraisal Math and Statistics
- j) Sales Comparison Approach
- k) Site Value
- l) Cost Approach
- m) Income Approach
- n) Valuation of Partial Interests
- o) Appraisal Standards and Ethics
- p) Narrative Report Writing

Continuing Education Topics:

- a) Ad Valorem Taxation
- b) Arbitration
- c) Business Courses Related to Practice of Real Estate Appraisal
- d) Construction Estimating
- e) Ethics and Standards of Professional Practice
- f) Land Use Planning, Zoning, Taxation
- g) Management, Leasing, Brokerage, Timesharing
- h) Property Development
- i) Real Estate Appraisal
- j) Real Estate Law
- k) Real Estate Litigation
- l) Real Estate Financing and Investment
- m) Real Estate Appraisal Related Computer Applications
- n) Real Estate Securities and Syndication
- o) Real Property Exchange

- 4) **Attach transcripts or adequate proof of only the additional 45 or 60 hours of tested appraisal education beyond the AQB certification requirements.**

Statement of Verification: I verify all education information I have provided is accurate and that I have obtained an additional 45 **tested** education hours for the RAA designation or 60 **tested** education hours for the GAA designation beyond the Appraiser Qualification Board's education requirement at the time of certification.

Signed: _____

Date: _____

SECTION VII: EXPERIENCE INFORMATION

Designation Criteria: You must possess an additional 1,000 hours of appraisal experience **beyond** your certification requirements. To verify these additional hours, submit the information in one of the three following formats: 1) experience log utilized by your state regulatory board, 2) Schedule 1: Summary Experience Log, below, or 3) Schedule 2: Line Item Experience Log, on the next page. Please log only the additional 1,000 hours. Additional documentation may be requested. **Whatever reporting method chosen you must sign the Statement of Verification below.**

1) Number of years practicing as a full-time appraiser: _____

Statement of Verification: I verify that I have obtained an additional 1,000 hours of appraisal experience beyond the requirement of my state at the time of certification.

Signed: _____ Date: _____

SCHEDULE 1: SUMMARY EXPERIENCE LOG

REPORT	DATES (MO./YR.)		NUMBER OF REPORTS	TOTAL ESTIMATED HOURS
	FROM	TO		
FNMA 1004 / FHLMC 70 (URAR Report)				
FNMA 1025 / FHLMC 72 (Small Residential Income Property Report)				
FNMA 1073 / FHLMC 465 (Condominium Report)				
ERC-3 (Employee Relocation Report)				
FNMA 1050 / FHLMC 71A FNMA 1050A/ FHLMC 71B (Large Residential Income Property Report)				
Narrative Reports (Residential)				
Narrative Reports (Commercial)				
Other (Specify):				
Other (Specify):				
Other (Specify):				
			TOTAL HOURS:	

SECTION VIII: PAYMENT INFORMATION

Designation Criteria: Check the amount and method of payment.

Application Fee

Check One: \$100.00 for one designation \$200.00 for both designations

AND

Pro-rated Annual Fee

Check One: \$100 for 1st Quarter (January – March) \$200 for 1st Quarter Both Designations
 \$75 for 2nd Quarter (April – June) \$150 for 2nd Quarter Both Designations
 \$50 for 3rd Quarter (July – September) \$100 for 3rd Quarter Both Designations
 \$25 for 4th Quarter (October – December) \$50 for 4th Quarter Both Designations

Total: _____

- Enclosed is my check payable to the NATIONAL ASSOCIATION OF REALTORS® :
- Please bill my credit card:

Check One: VISA MASTERCARD AMERICAN EXPRESS

Account No. _____ Expiration Date: _____

Cardholder's Name (Please Print): _____

Cardholder's Signature: _____

SECTION IX: VERIFICATION INFORMATION

Designation Criteria: The type of designation for which you are applying should be selected. This portion of the application must contain your original signature.

I hereby apply for the designation of ____ RAA ____ GAA ___ RAA/GAA granted by the NATIONAL ASSOCIATION OF REALTORS® for use solely within the stipulated limitations of use for said mark.

I declare that all of the information given herein, including supplementary statements or documents, is complete and correct to the best of my knowledge and belief and that such information is furnished for the purpose of assisting the NATIONAL ASSOCIATION OF REALTORS® in evaluating the adequacy of my qualifications for the designation and that it will be held in strict confidence. I agree that the Appraisal Designations Admissions Panel can make appropriate inquiry as to the validity of any or all of the representations made herein. I agree that any information and comment furnished to the Admissions Panel by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action for slander, libel, or defamation of character. Any statements or documents found to be false could result in the revocation of the designation. Further I understand that if approved for this designation, I must maintain my membership in NAR or its affiliates and be currently licensed or certified by my state in order to remain eligible to use the designation.

Signature of Applicant

Date

Please return completed application and attachments to:

NATIONAL ASSOCIATION OF REALTORS®
P.O. Box 10958
Chicago, IL 60610-0958