IOWA DIVISION OF BANKING-PROFESSIONAL LICENSING REAL ESTATE APPRAISER BOARD

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EMAIL: REALESTATEAPPRAISERBOARD@IOWA.GOV WEBSITE: https://www.idob.state.ia.us/reap/

INSTRUCTOR APPLICATION

A: PROVIDER INFORMATION		
PROVIDER NAME		PROVIDER NUMBER
COURSE NAME		
B: INSTRUCTOR INFORMATION		
INSTRUCTOR NAME (Last, First)	COURSE INS	
YES NO I am a certified USPAP instructor.	If No, an instructor development workshop must har past 24 months. Submit verification of completion.	ve been completed in
C: INSTRUCTOR ABILITY TO TEACH (Must meet one of the following)		
YES NO Instructor has a Bachelor's degree or higher from an accredited college.		
YES NO Instructor holds a current teaching certificate in a real-estate related field.		
YES NO Instructor holds a certificate of completion in the area of instruction from an instructor institute, workshop, or school that is sponsored by a member of The Appraisal Foundation. (ATTACH detail specific teaching experiences)		
YES NO Instructor holds a full-time, current appointment to the faculty of an accredited college.		
OTHER (Specify)		
D: IN-DEPTH SUBJECT MATTER KNOWLEDGE (Must meet one of the following)		
YES NO Instructor holds a bachelor's degree or higher from an accredited college with a major directly related to the subject matter of the course		
YES NO Instructor holds a bachelor's degree or higher from an accredited college and has five years of appraisal experience related to the subject matter of the course;		
YES NO Instructor holds a generally recognized professional real property appraisal designation		
OTHER (Specify)		
E: ADDITIONAL INFORMATION (Required)		
As part of the application, the instructor or provider must submit a current copy of the instructor's resume and/or biography.		
F: CERTIFICATION		
I certify that the information contained herein is true and correct. By the filing of this application, the above-named instructor agrees to comply with all rules of the Iowa Real Estate Appraiser Examining Board. I am qualified to teach all or a portion of the course contained with this application. MUST BE SIGNED BY INSTRUCTOR.		
NSTRUCTOR SIGNATURE DATE:		