

**NORTH CAROLINA APPRAISAL BOARD**

5830 Six Forks Road, Raleigh, NC 27609  
Phone: (919) 870-4854 Fax: (919) 870-4859  
Website: [www.ncappraisalboard.org](http://www.ncappraisalboard.org)

**Sponsor Application  
for  
Continuing Education**

<u>Board Use Only</u>	
Sponsor #:	_____
1. Course #:	_____
<input type="checkbox"/> Appr <input type="checkbox"/> Not Appr # Hrs	_____
2. Course #:	_____
<input type="checkbox"/> Appr <input type="checkbox"/> Not Appr # Hrs	_____
3. Course #:	_____
<input type="checkbox"/> Appr <input type="checkbox"/> Not Appr # Hrs	_____
Date:	_____
By:	_____
Amt Received:	_____
Trans. No.:	_____

Applicant is (check one):

- Private School                       State College or University     Other
- Trade Organization                 Community College

**Fee Schedule:**

Private School or Trade Organization: \$100 per course  
State College, University, Community College or Government Agency: \$0

Total enclosed (contingent upon the type of sponsor): \$\_\_\_\_\_

**Instructions:** To apply for continuing education course approval, the NC Appraisal Board will need this continuing education Sponsor Application form completed. Along with this form, we must receive proper payment, the course material, and a timed course outline for each course submitted. You MUST obtain approval from the Appraisal Board before advertising any course. To see our complete rules and guidelines please visit our website, [www.ncappraisalboard.org](http://www.ncappraisalboard.org).

1. Sponsor Information:

Name of School: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

URL: \_\_\_\_\_

Name of Director: \_\_\_\_\_

Contact Person (if different from Director): \_\_\_\_\_

Contact Person's Title: \_\_\_\_\_

Contact Person's Email: \_\_\_\_\_

2. The sponsor (check one):

- Is the owner of the course.
- Has permission of the course owner to seek course approval. (Attach evidence)

3. Course Information: Please list the courses for which you are seeking approval. ***If you are seeking approval for the 7-hour National USPAP Update course, please indicate which edition you will be offering. SYNCHRONOUS COURSES are considered classroom and do not need separate course approvals from the NC Appraisal Board.***

a. Title: \_\_\_\_\_

No. of Hours: \_\_\_\_\_ Is this an asynchronous course:  Yes  No

*If yes, please provide proof of the course delivery mechanism approval by an organization approved by the AQB, such as IDECC.*

b. Title: \_\_\_\_\_

No. of Hours: \_\_\_\_\_ Is this an asynchronous course:  Yes  No

*If yes, please provide proof of the course delivery mechanism approval by an organization approved by the AQB, such as IDECC.*

c. Title: \_\_\_\_\_

No. of Hours: \_\_\_\_\_ Is this an asynchronous course:  Yes  No

*If yes, please provide proof of the course delivery mechanism approval by an organization approved by the AQB, such as IDECC.*

4. Describe below or attach a copy of course cancellation and fee refund policies. (Rule 57B.0606(7)).

\_\_\_\_\_  
 \_\_\_\_\_

5. Indicate the names and signatures of the person(s) who are authorized to sign the course completion certificate. (Required only for NC-based course sponsors (Rule 57B.607).)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

6. Instructor Information: Please complete the following for each course.

	<u>Instructor's Name</u>	<u>Phone Number</u>	<u>Email Address</u>
a.	1.		
	2.		
	3.		
b.	1.		
	2.		
	3.		
c.	1.		
	2.		
	3.		

7. Please attach a summary of all of the listed instructor's education and/or experience that he/she has in order to be qualified to teach the subject matter.

8. Character:

- a) Have any of the above instructors ever been denied a registration, license or certificate, had any disciplinary action, or have any current charges pending against them in NC or any other state?  Yes  No
  
- a) Have any of the above instructors ever been convicted of, plead guilty to or no contest to any criminal offense in NC or any other state?  Yes  No
  
- b) Do any of the above instructors have any criminal charges currently pending against them in NC or any other state?  Yes  No

*IF YOU HAVE ANSWERED "YES," PLEASE PROVIDE THE INSTRUCTORS NAME AND A WRITTEN EXPLANATION.*

II. Regarding Criminal Offenses:

- d) Have any of the above instructors ever been convicted of or plead guilty to or no contest to any criminal offense in NC or any other state?  Yes  No
  
- e) Are there currently any criminal charges now pending against any of the above instructors in NC or any other state?  Yes  No

*"CRIMINAL CHARGES" DO NOT INCLUDE SPEEDING OR PARKING VIOLATIONS. THEY DO INCLUDE DRIVING WHILE INTOXICATED OR WHILE UNDER THE INFLUENCE OF ALCOHOL OR DRUGS. IF YOU BELIEVE A CHARGE HAS BEEN ERASED FROM YOUR RECORD OR EXPUNGED, YOU MUST CHECK WITH THE APPROPRIATE COURT TO MAKE SURE THIS HAS HAPPENED.*

*IF ANY OF THESE ANSWERS ARE "YES," PROVIDE A COPY OF THE COURT JUDGMENT, ARREST WARRANT, OR BILL OF INDICTMENT. INCLUDE A RELEASE FROM PROBATION OR PAROLE IF APPROPRIATE. YOU MUST ALSO PROVIDE A COMPLETE WRITTEN EXPLANATION OF EACH CHARGE OR CONVICTION WITH THIS APPLICATION.*

*RULE 57B.0306(f) PROVIDES THAT INSTRUCTORS MUST NOT HAVE RECEIVED A REPRIMAND, SUSPENSION (ACTIVE OR INACTIVE), OR REVOCATION OF THEIR APPRAISER'S LICENSE OR CERTIFICATION WITHIN TWO YEARS PRIOR TO THE DATE OF THIS APPLICATION.*

9. Certification and Signature. I hereby certify that I have read ALL North Carolina Appraiser Board's Rules relating to the conduct of Appraisal Continuing Education Courses and will fully comply with such Rules. I also certify that I will comply with the Appraisal Qualification Board's requirements for any courses that are being offered in a synchronous format and that the above course information and instructor information is correct to the best of my knowledge.

Name of Authorized Official (Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

*\*\*Please note that if you wish to add another instructor to teach an approved course, please notify the Board in writing of the instructor's name, contact information and character information. Submitting a completed page three with a cover letter will also be accepted.*