

**DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
MAINE BOARD OF REAL ESTATE APPRAISERS**

35 State House Station, Augusta, ME 04333-0035

PH (207) 624-8518 FAX (207) 624-8637

TTY users call Maine Relay 711

[www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing)

**CONTINUING EDUCATION PROGRAM APPROVAL**

Course requirements and provider's responsibilities are outlined in Rule Chapter 220 of the Board's License Law & Rules (a copy of Chapter 220 is included with this application). The rules define the Board's requirements for approval of continuing education programs. Review the rules carefully before making application for approval.

**ACCEPTABLE SUBJECT MATTER**

Acceptable continuing education subject matter must relate to the practice of real estate appraisal in the State of Maine, be relevant as regards the appraiser's duties to clients and or to inform the appraiser of state and federal laws relevant to real estate appraisal in Maine. Acceptable topics may include:

- Ad valorem taxation;
- Arbitration, dispute resolution;
- Courses related to the practice of real estate appraisal or consulting;
- Development cost estimating;
- Ethics and standards of professional practice, USPAP;
- Land use, planning, zoning;
- Management, leasing, timesharing;
- Property development, partial interests;
- Real estate law, easements, and legal interests;
- Real estate litigation, damages, condemnation;
- Real estate financing and investment;
- Real estate appraisal related computer applications; and/or
- Real estate securities and syndication.

**NOTE:**

- Programs must be a minimum of 2 consecutive hours of classroom instruction, excluding breaks.
- The material to be taught may include subjects not directly related to real estate appraisal. However, only material that is directly related to real estate appraisal will be recognized for continuing education credits.
- All programs must be taught "live" in a traditional classroom or seminar setting. No form of distance education or recorded presentation will be approved.

**APPLICATION PROCEDURE**

Submit the application and fee with all required attachments as far in advance of the course administration date as possible to allow adequate time for evaluation and response by Board staff. You will be notified in writing as to the decision once the course has been reviewed. If the program is approved, your notification will include the program number assigned and the date and term of approval.

Review the checklist below before submitting your application to be sure you have completed the application properly and have included all required attachments. Feel free to contact Board staff (contact info above) if you have questions.

- Complete the application in full and attach the \$175.00 fee. Note that programs must be approved prior to commencement of class.
- Include all required attachments:

- Learning Objectives – Skills or knowledge you expect participants to gain through completion of this program.
- Program Outline – Outline shall be based on the learning objectives and be as detailed as necessary to adequately describe course content. Outline must contain a breakdown of classroom time to be spent on each topic.
- Instructor Resume – Brief biography describing instructor’s qualifications to teach the subject.

## COURSE PROVIDER’S ADMINISTRATIVE RESPONSIBILITIES

Once a program is approved, the program provider is responsible for the following:

- Report to the Board in writing any of the following that differ from the information reported on the original application:
  - program title (the program must always be referred to as registered on the original application unless a change to the title is reported to the Board of REA before usage)
  - dates
  - locations
  - instructor(s)
  - course content (any change in content must be reported to and approved by the Board in advance of program offering)
- Report to the Board in writing a schedule of planned course offerings for inclusion in the Board’s Continuing Education Course Schedule. The schedule is distributed to appraisers upon request as well as posted to our website. Notify the Board as any additional course offerings are scheduled.
- Ensure that participants have completed the program in its entirety, in order to receive credit.
- Distribute and collect REA Student Evaluation forms at the conclusion of each program.
  - Providers must distribute and collect the Board’s Student Evaluation form included in this packet in addition to any other type of evaluation that may be utilized by the provider, program instructor or school.
- Summarize students’ responses on the Instructor’s Summary of Student Evaluations and submit the summary to Board staff. Summaries may be submitted upon request, however, summaries must be submitted upon application for renewal of program approval. Retain completed evaluations for one (1) year following conclusion of the program.
- Maintain a record of licensees who complete the program to be retained by the provider for a minimum of two (2) years. Provider is NOT required to submit a copy of such record to Board staff.
- Issue a certificate of completion to each program participant who successfully completes the program (sample enclosed). The certificate must include the following:
  - 1) the student’s full name and license number
  - 2) number of clock hours for which the program has been approved
  - 3) full title of the program as it is registered with the Board
  - 4) program number assigned by the Board
  - 5) name of the sponsoring school or individual under which the program is approved
  - 6) date on which program was administered, or, if program length is more than one day, date on which program was completed
  - 7) signature of program instructor or authorized school official
- Program approval is valid for a period of one year from the date of approval. Be aware of the program expiration date indicated in the letter of approval. The Board does NOT notify sponsors when program approval is about to expire. Sponsors are expected to monitor the terms of its approved programs and submit a renewal application if re-approval is desired.

**FEE \$175**

**NON-REFUNDABLE**

Only live/classroom setting programs will be considered.

Program **MUST** be approved prior to commencement of class.

Make Check Payable to:  
Maine State Treasurer

**CONTINUING EDUCATION PROGRAM  
APPROVAL APPLICATION**

DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
MAILING ADDRESS:

**MAINE BOARD OF REAL ESTATE  
APPRAISERS**

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FOR OFFICE USE ONLY - 1470

CHECK NO \_\_\_\_\_

AMT \_\_\_\_\_

CASH NO \_\_\_\_\_

APPRVL DATE \_\_\_\_\_

EXPIRE DATE \_\_\_\_\_

CLOCK HOURS \_\_\_\_\_

PROGRAM # \_\_\_\_\_

**PROGRAM SPONSOR** \_\_\_\_\_  
(School, organization or individual applying for program approval)

**CONTACT PERSON** \_\_\_\_\_  
(Person to whom REA should direct any communication regarding program approval)

Street/PO Box \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ FAX ( ) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

**PROGRAM TITLE** \_\_\_\_\_

**INSTRUCTOR** \_\_\_\_\_

**HOURS REQUESTED** \_\_\_\_\_ (min. 2 hrs)

**PROGRAM WILL BEGIN** \_\_\_\_\_ AM/PM

**PROGRAM WILL END** \_\_\_\_\_ AM/PM

**COURSE FEE \$** \_\_\_\_\_

**Live Delivery Program**  Yes  No

*All programs must be taught in a live, traditional classroom setting. No form of distance education will be approved.*

**PAYMENT OPTIONS:**

Make checks payable to "Maine State Treasurer" – If you wish to pay by MasterCard or Visa, fill out the following:

**NAME OF CARDHOLDER (please print):** \_\_\_\_\_

I authorize the Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation to charge my

VISA  MASTERCARD the following amount: \$ \_\_\_\_\_

I UNDERSTAND THAT FEES ARE NON-REFUNDABLE

Card number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PROGRAM SCHEDULE**

DATE	FACILITY	CITY	STATE

**NEEDS ASSESSMENT - Explain how the need for this program was established.**

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**LEARNING OBJECTIVES & COURSE OUTLINE**

Attach to this application the following:

- a. A sheet listing the learning objectives. The learning objectives are the specific skills and knowledge participants are expected to gain as a result of completing this program.
- b. A detailed program outline that defines the learning objectives including the approximate amount of time to be spent on each topic.

**METHOD OF INSTRUCTION – Indicate the method(s) to be used, i.e., lecture, video, team teaching, panel discussion, etc.**

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**MATERIALS TO BE USED – List/describe the materials to be used, i.e., handouts, visual aids, etc. Include the name and author of any texts or other published material to be used.**

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**INSTRUCTOR – Attach a brief resume of instructor’s qualifications in relation to the course topic.**

**CERTIFIED STATEMENT AND SIGNATURE OF PROGRAM SPONSOR OR AUTHORIZED SCHOOL OFFICIAL**

By my signature, I hereby agree to abide by the requirements and conditions set forth by Rule Chapter 220 of the State of Maine Real Estate Appraisers Rules and Regulations pertaining to continuing education programs and certify that the information contained in this application is accurate and true to the best of my knowledge and belief.

\_\_\_\_\_  
SIGNATURE OF PROGRAM SPONSOR OR AUTHORIZED SCHOOL OFFICIAL

\_\_\_\_\_  
DATE

**THE FOLLOWING ATTACHMENTS MUST BE INCLUDED WITH THIS APPLICATION**

- 1. Learning Objectives
- 2. Detailed, Timed Program Outline
- 3. Instructor Resume

***\*PLEASE NOTE BOARD APPROVAL IS NOT REQUIRED FOR AQB APPROVED COURSES\****

**FEE \$175**

**NON-REFUNDABLE**

Only live/classroom setting programs will be considered.

Program **MUST** be approved prior to commencement of class.

Make Check Payable to:  
**Maine State Treasurer**

**CONTINUING EDUCATION PROGRAM  
RENEWAL APPLICATION**

DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
MAILING ADDRESS:

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APPRAISERS**

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FOR OFFICE USE ONLY

CHECK NO \_\_\_\_\_

AMT \_\_\_\_\_

CASH NO \_\_\_\_\_

APPRVL DATE \_\_\_\_\_

EXPIRE DATE \_\_\_\_\_

CLOCK HOURS \_\_\_\_\_

PROGRAM # \_\_\_\_\_

**PROGRAM SPONSOR** \_\_\_\_\_

(School, organization or individual applying for program approval)

**CONTACT PERSON** \_\_\_\_\_

(Person to whom REA should direct any communication regarding program approval)

**Street/PO Box** \_\_\_\_\_ **City** \_\_\_\_\_

**State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Phone** ( ) \_\_\_\_\_ - \_\_\_\_\_ **FAX** ( ) \_\_\_\_\_ - \_\_\_\_\_

**Email** \_\_\_\_\_

**PROGRAM TITLE** \_\_\_\_\_

**INSTRUCTOR** \_\_\_\_\_

**HOURS REQUESTED** \_\_\_\_\_ (min. 2 hrs)

**PROGRAM WILL BEGIN** \_\_\_\_\_ **AM/PM**

**PROGRAM WILL END** \_\_\_\_\_ **AM/PM**

**COURSE FEE \$** \_\_\_\_\_

**PAYMENT OPTIONS:**

Make checks payable to "Maine State Treasurer" – If you wish to pay by MasterCard or Visa, fill out the following:

**NAME OF CARDHOLDER** (please print): \_\_\_\_\_

I authorize the Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation to charge my

**VISA**       **MASTERCARD**      the following amount: \$ \_\_\_\_\_

**I UNDERSTAND THAT FEES ARE NON-REFUNDABLE**

**Card number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PROGRAM SCHEDULE**

DATE	FACILITY	CITY	STATE

**COURSE OFFERINGS SINCE LAST APPROVAL**

DATE	FACILITY	CITY	STATE

**SPONSOR EVALUATION**

In your estimation, were the course objectives listed on the original application met?

YES     NO

If no, describe the changes you have made or will make to ensure the objectives are met for this approval: \_\_\_\_\_

\_\_\_\_\_

**CERTIFIED STATEMENT AND SIGNATURE OF PROGRAM SPONSOR OR AUTHORIZED SCHOOL OFFICIAL**

By my signature, I hereby agree to abide by the requirements and conditions set forth by Rule Chapter 220 of the State of Maine Real Estate Appraisers Rules and Regulations pertaining to continuing education programs and certify that the information contained in this application is accurate and true to the best of my knowledge and belief. If renewed approval is granted, I agree to the following conditions:

1. To avoid inference through advertising or oral representation that approval is an endorsement or recommendation by the Board.
2. To make reasonable effort to encourage students to offer comments regarding the course.
3. To inform Board staff at the earliest possible date of any changes which would render inaccurate the information contained in this application.

\_\_\_\_\_  
SIGNATURE OF PROGRAM SPONSOR OR AUTHORIZED SCHOOL OFFICIAL

\_\_\_\_\_  
DATE

**THE FOLLOWING ATTACHMENTS MUST BE INCLUDED WITH THIS APPLICATION**

- ✓ Summaries of Student Evaluations from prior course offerings.

***\*PLEASE NOTE BOARD APPROVAL IS NOT REQUIRED FOR AQB APPROVED COURSES\****

# STUDENT EVALUATION OF CONTINUING EDUCATION PROGRAM

DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION

## MAINE REAL ESTATE APPRAISERS

RETURN THIS EVALUATION TO YOUR PROGRAM INSTRUCTOR

You have just completed a program recognized by the Board of Real Estate Appraisers as complying with the educational requirement for renewal or activation of your real estate license. The Board is committed to excellence in appraiser education and in that interest encourages your comments regarding the quality of this program. Your constructive comments on the instructor, course content and classroom environment will help us improve future programs. The Board values your opinion and offers its sincere thanks for your cooperation in our effort to ensure quality appraiser education. In addition to this evaluation feel free to contact the Board directly with your comments.

PROGRAM SPONSOR/SCHOOL \_\_\_\_\_  
PROGRAM TITLE \_\_\_\_\_  
DATE M/\_\_\_ D/\_\_\_ Y/\_\_\_ LOCATION \_\_\_\_\_ INSTRUCTOR \_\_\_\_\_

### RECORD THE NUMBER OF RESPONSES RECEIVED IN EACH RATING CATEGORY:

#### COURSE MATERIAL:

Course objectives were clear.

Course objectives were met.

Course material was well organized.

Course material was presented in sufficient depth.

Course is professionally beneficial.

I would recommend this program to my colleagues.

#### INSTRUCTOR:

The instructor was knowledgeable in the subject.

The teaching methods used by the instructor were effective.

Instructor communicated subject matter well.

Instructor supervised course well.

Strongly  
Disagree

Strongly  
Agree

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

What did you like most about this program? \_\_\_\_\_

\_\_\_\_\_

What did you like least about this program? \_\_\_\_\_

\_\_\_\_\_

Additional Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# CONTINUING EDUCATION PROGRAM INSTRUCTOR'S SUMMARY OF STUDENT EVALUATIONS

DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION

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**Summarize students' responses on this form. Record student comments on a separate sheet and attach to this form. This summary must be submitted upon application for renewal of program approval Retain the original evaluations and a copy of this summary for your records.**

PROGRAM SPONSOR/SCHOOL \_\_\_\_\_  
PROGRAM TITLE \_\_\_\_\_  
PROGRAM NUMBER \_\_\_\_\_ CLOCK HOURS \_\_\_\_\_ NUMBER OF PARTICIPANTS \_\_\_\_\_  
PROGRAM DATE M/\_\_\_ D/\_\_\_ Y/\_\_\_ LOCATION \_\_\_\_\_ INSTRUCTOR \_\_\_\_\_

**RECORD THE NUMBER OF RESPONSES RECEIVED IN EACH RATING CATEGORY:**

**COURSE MATERIAL:**

- Course objectives were clear.
- Course objectives were met.
- Course material was well organized.
- Course material was presented in sufficient depth.
- Course is professionally beneficial.
- I would recommend this program to my colleagues.

**INSTRUCTOR:**

- The instructor was knowledgeable in the subject.
- The teaching methods used by the instructor were effective.
- Instructor communicated subject matter well.
- Instructor supervised course well.

**Strongly Disagree                      Strongly Agree**

1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5

**Please describe any changes you plan to make to this program after review of evaluations.** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Any substantial change in the course syllabus must be reported to the Board.**



**MAINE BOARD OF REAL ESTATE APPRAISERS  
CONTINUING EDUCATION PROGRAM  
SAMPLE CERTIFICATE OF COMPLETION**

Program provider may use the sample certificate below or one of its own design providing the certificate contains at a minimum the following information:

- the student's full name and license number
- number of clock hours for which the program has been approved
- full title of the program as it is registered with the Board
- program number assigned by the Board
- name of the sponsoring school or individual under which the program is approved
- date on which program was administered, or, if the program length is more than one day, date on which program was completed
- signature of program instructor or authorized school official

**MAINE REAL ESTATE APPRAISERS CONTINUING EDUCATION  
CERTIFICATE OF COMPLETION**

This certifies that

-----  
Licensee Name

-----  
Licensee Number

has met the standards required for completion of \_\_\_\_\_ hours of Maine Board of Real Estate Appraisers approved continuing education for:

-----  
Program Title

-----  
Program Number

-----  
Date Program Completed

-----  
Sponsor Name

-----  
Authorized Signature

**KEEP THIS CERTIFICATE AS VERIFICATION THAT YOU COMPLETED THE PROGRAM NAMED.  
IF YOU ARE AUDITED UPON YOUR LICENSE RENEWAL, YOU WILL BE REQUIRED TO SUBMIT  
TO THE BOARD OF REAL ESTATE APPRAISERS CERTIFICATES SHOWING YOU COMPLETED A  
MINIMUM OF 14 HOURS OF APPROVED CONTINUING EDUCATION.**