



Arkansas Appraiser Licensing and Certification Board
 101 East Capitol, Suite 430
 Little Rock, AR 72201
www.arkansas.gov/alcb
 501-296-1843

Form EX-207

Application Received/By: _____

Check No. _____ Amount _____

Credential Number: _____

Process Date/By: _____

FOR BOARD USE ONLY

APPLICATION FOR STATE REGISTERED APPRAISER

This information constitutes a part of the application process for those candidates who desire to become a State Registered Appraiser. The speed with which your application is processed and registration issued depends directly upon the accuracy and completeness of the information provided on this and succeeding forms. A check for **\$200** made payable to the Arkansas Appraiser Licensing and Certification Board (AALCB) and completion certificates for the 79 hours of qualifying education **must** accompany this request for a State Registered Appraiser credential.

Full Legal Name: _____
Last, First, Middle Name

Any Other Name(s) Known As: _____

Gender: _____ SSN: _____ Birth Date: _____

Residence: _____
Street Address

City/State/Zip County

Home Phone: () _____ Work Phone: () _____

Cell: () _____ Fax Number: () _____

Business Mailing Address:
(Leave blank if same as above)

Street Address

City/State/Zip

E-Mail: _____
 (We will send notifications out via e-mail. This information must be kept current.)

Please answer the following questions:

Yes or No Have you ever been registered, licensed, or certified in Arkansas or another state as an appraiser? If yes, give your license number and the state(s): _____

Please check highest education level attained: High school graduate (GED certificate) Associate's degree
 Bachelor's degree Master's degree Other

Yes or No Have you ever (1) been convicted of or pled guilty or *nolo contendere* to a criminal offense (Include ALL felonies and misdemeanors, including DWI and DUI. You do not have to include traffic tickets); (2) been granted first offender treatment upon being charged with any criminal offense; (3) been placed on probation, community supervision, or deferred adjudication; or (4) are there any criminal charges pending against you? If marked yes, submit copies of all indictments, information, judgments, orders and charges, and a written explanation.

Yes or No I have completed the 4 hour Supervisor/Trainee course. (Include copy of certificate with application)

Yes or No I have completed the 15 hour USPAP or equivalent course. (Include copy of certificate with application)

Yes or No I have completed the 30 hour Basic Appraisal Principles course. (Include copy of certificate with application)

Yes or No I have completed the 30 hour Basic Appraisal Procedures course. (Include copy of certificate with application)

Yes or No I have read and understand the Arkansas Appraiser Licensing and Certification Board "Statutes" and "Rules and Regulations."

Yes or No I have read and understand the current edition of the Uniform Standards of Professional Appraisal Practice (USPAP).

Please note that all qualifying education must be completed within the five (5) year period prior to the date of application.

I am applying for approval as a State Registered Appraiser as:

Arkansas Resident Non-Resident

As of the filing date of this application for State Registration, my current or proposed supervisor(s)

is: _____ (Name and credential number).

I certify that I am eighteen (18) years of age or older and have received a high school diploma or its equivalent.

I certify that I have read and understand this application and that the answers given herein are true, correct and complete. I will furnish all additional information or documentation requested by the Arkansas Appraiser Licensing and Certification Board (AALCB) for verification of the information given in this application. I understand that failing to provide information or providing information that is false, misleading or fraudulent is grounds for denial of this application or revocation of my credential.

I certify that I understand and give consent for a state criminal background check performed by the Identification Bureau of the Department of Arkansas State Police and a national fingerprint-based criminal background check performed by the Federal Bureau of Investigation (FBI) in compliance with federal law and regulations to be completed. A copy of the Noncriminal Justice Applicant's Privacy Rights is a part of this application.

I agree that the Board may send all notices and communications concerning my credential to my email address on file with the board.

By signing this application and under penalty of perjury, I certify that I am the person whose name and address appear on the application and certify that all the information I have given on this application is true, correct, and complete.

Applicant's Signature

Date

I, the undersigned notary public, certify that the above named individual appeared before me in person and acknowledged signing the foregoing instrument for the purposes therein set forth on this the _____ day of _____, 20_____.

Notary Public Signature

State of: _____

County of: _____

My Commission expires: _____

Arkansas Appraiser Licensing & Certification Board

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The official must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.²

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulations or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34).

¹Written notification includes electronic notification, but excludes oral notification.

²See 28 CFR 50.12(b).

³See 5 U.S.C. 552a (b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d)