



**REAL ESTATE APPRAISAL  
USPAP QE/CE COURSE RENEWAL APPLICATION**

ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
Division of Real Estate – Licensing  
320 West Washington Street, 3<sup>rd</sup> Floor  
Springfield, Illinois 62786  
[fpr.realestateappraisal@illinois.gov](mailto:fpr.realestateappraisal@illinois.gov)

PRIMARY DOCUMENT

**EDU 15/7**

**RENEWAL DUE:  
12/31/2024**

**APPLICATION INSTRUCTIONS:**

1. The application must be completed in its entirety. Please type or print legibly.
2. Course Materials are NOT required for Renewal.
3. Please submit current IDEEC (for non-classroom courses)
4. Please complete and attach the enclosed USPAP Instructor Form
5. Note: If submitted after 12/31/2024 please include the required \$75 late fee

**APPLICANT INFORMATION**

USPAP COURSE NAME with EFFECTIVE YEAR(S):		USPAP COURSE LIC #
NAME OF EDUCATION PROVIDER		PROVIDER LICENSE # <b>555.</b>
DBA (if applicable)		

**COURSE DELIVERY:**

<input type="checkbox"/> CLASSROOM	<input type="checkbox"/> SYNCHRONOUS OR ASYNCHRONOUS – IDECC required
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**COURSE RENEWAL INFORMATION:**

<input type="checkbox"/> QE - 15-Hour National USPAP - \$150	<input type="checkbox"/> CE – 7-Hour National USPAP Update or Equiv. - \$100
<input type="checkbox"/> Late Renewal of QE 15-Hour USPAP - \$75 (after 12/31/24)	<input type="checkbox"/> Late Renewal of CE 7-Hour USPAP - \$75 (after 12/31/24)

**CERTIFYING STATEMENT:**

I hereby certify that, to the best of my knowledge, all information herein is true and correct; that the signature below re-affirms the certifying affidavit signed on the course provider application; and that I am authorized to sign this application.

NAME (PRINT)

SIGNATURE

DATE



## USPAP INSTRUCTOR REGISTRATION

SECONDARY DOCUMENT

# USPAP

ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
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**INSTRUCTIONS:** This form is to be completed and submitted by the Education Provider or instructor with any and all USPAP courses, whether the course is presented in a classroom, synchronously, or asynchronously. In accordance with AQB Criteria, at least one of the course instructors must be an **AQB Certified USPAP Instructor** who is also a state certified appraiser. USPAP continuing education credit shall only be awarded when the course is instructed by at least one AQB Certified USPAP Instructor who is also a state certified appraiser in good standing. If there will be multiple offerings throughout a year, you may submit multiple instructors and multiple dates. There is no fee for this form, however, no USPAP course will be approved without the instructor(s) being approved by the Department.

### APPLICANT IDENTIFYING INFORMATION

NAME OF EDUCATION PROVIDER

Your Illinois License Number

**555.**

DBA (if applicable)

COURSE TITLE (You must include the effective year(s) in the title)

### USPAP COURSE INFORMATION

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | 15-Hour National USPAP Course or Equivalent – IL1-08 - Classroom or Synchronous (Livestream) |
| <input type="checkbox"/> | 15-Hour National USPAP Course or Equivalent – IL1-08 – Asynchronous                          |
| <input type="checkbox"/> | 7-Hour National USPAP Update or Equivalent - Classroom or Synchronous (Livestream)           |
| <input type="checkbox"/> | 7-Hour National USPAP Update or Equivalent – Asynchronous                                    |

**INSTRUCTORS:** Include your CURRENT CDEI certificate. Complete the following:

NAME OF INSTRUCTOR

STATE APPRAISER CERTIFICATION (License)

### CERTIFICATION BY EDUCATION PROVIDER

I hereby certify that, to the best of my knowledge, all information herein is true and correct; that the signature below re-affirms the certifying affidavit signed on the application; and that I am authorized to sign this application.

NAME PRINTED

SIGNATURE

DATE