## MONTANA BOARD OF REAL ESTATE APPRAISERS 301 South Park, 4th Floor PO BOX 200513 Helena Montana 59620-0513 Phone: (406) 444-6880 Email: <u>dlibsdhelp@mt.gov</u> Website: <u>www.realestateappraiser.mt.gov</u>

## APPLICATION FOR MENTOR ENDORSEMENT FEE: \$100

1. Full Name:

2. Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

3. Email Address: \_\_\_\_\_

4. License Type: \_\_\_\_\_ License Number: \_\_\_\_\_ A person must be a certified general appraiser to qualify to mentor trainees.

I posses an active, unrestricted Montana Certified Appraiser license

I have successfully completed the board-approved, four-hour Supervisor-Training Course (attach completion certificate)

I hereby attest and affirm that my license or myself have not been the subject of any disciplinary action affecting the legal eligibility to practice, within any jurisdiction, within the last three years.

I hereby attest and affirm that I will actively supervise and train the real estate trainee(s) during the time the trainee(s) remain under my supervision as real estate appraiser trainee(s). I further affirm that I may only supervise a maximum of three trainees.

I authorize the release of information concerning my education, training, record, character, license history and competence to practice, by anyone who might possess such information, to the Montana Board of REAL ESTATE APPRAISERS.

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement or evasive answer to any question may lead to denial of my application or subsequent revocation of licensure on ethical grounds. I have read and am familiar with the applicable licensure laws of the State of Montana and instructions to applicants for licensing. I accept the rules and procedures outlined in these documents as the basis for my application. I pledge to comply and abide by the Uniform Standards of Professional Appraisal Practice. I affirm that I understand the types of misconduct for which disciplinary action may be initiated against me.

Signature of Applicant: Date: Date:
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