

## MISSOURI REAL ESTATE APPRAISERS COMMISSION

3605 Missouri Blvd  
PO Box 1335  
Jefferson City, MO 65102-1335  
Phone (573) 751-0038

There are nine required elements required on the trainee experience log. Date of report, address of property, type of property, clients name, description of applicants work performed, scope of supervising appraisers review, scope of supervising appraisers supervision, number of actual hours worked by trainee, and appraised value. In addition, each page of the log must include the signature and license number of the supervisor and trainee.

You should claim the actual number of hours it took to complete the appraisal. If you go over the maximum allowed hours, please provide an explanation. Although the Commission offers average hours for appraisal of different property types (see the REA rules), the hours should not be considered binding.

Two sample log formats are provided for your use, please only choose one method of documentation of the trainee experience hours.

For further information regarding the Trainee Real Estate Appraiser Registration, please refer to Chapter 3 of the rules and regulation. In addition, An applicant for licensure or certification shall only receive credit for appraisal experience earned after July 1, 2008, if the applicant has registered as a trainee real estate appraiser with the commission prior to accruing the experience.

**Please refer to <http://pr.mo.gov/appraisers.asp> to review How will the 2015 AQB Criteria Changes Affect Licensure in Missouri.**



STATE OF MISSOURI  
 DEPARTMENT OF INSURANCE, FINANCIAL  
 INSTITUTIONS AND PROFESSIONAL REGISTRATION  
**APPRAISAL EXPERIENCE LOG FIELD AND REVIEW**

REAL ESTATE APPRAISERS COMMISSION  
 P.O. BOX 1335, 3605 MISSOURI BLVD.  
 JEFFERSON CITY, MISSOURI 65102

**APPLICANT**

Use the back of this form to list all the field and review appraisals for which credit hours are being requested. You must duplicate the back of this form for additional space. Read the certifying statement carefully and sign as indicated.

1. NAME (LAST, FIRST, MIDDLE)	(MAIDEN OR GIVEN SURNAME)	SOCIAL SECURITY NUMBER*
3. ADDRESS (STREET, CITY, STATE, ZIP CODE)		4. DATE OF BIRTH
5. CHECK THE BOX THAT INDICATES YOUR OCCUPATION:		
<input type="checkbox"/> FEE APPRAISER <input type="checkbox"/> MASS APPRAISER <input type="checkbox"/> OTHER (MODOT, ETC.) _____		

**APPRAISAL LOG SUMMARY**

Non-working farms or dwellings and outbuildings on acreage of any size are considered as residential.  
 Summarize your appraisal log by category (Residential = R or nonresidential = G) and by calendar year. Total the number of appraisals and credit hours for each calendar year within each category, residential or nonresidential.

	YEAR	APPRAISALS LISTED ON PAGES FROM - TO	RESIDENTIAL EXPERIENCE (CODE R)		NONRESIDENTIAL EXPERIENCE (CODE G)	
			# OF APPRAISALS COMPLETED	TOTAL # OF HOURS	# OF APPRAISALS COMPLETED	TOTAL # OF HOURS
1.		_____				
2.		_____				
3.		_____				
4.		_____				
5.		_____				
<b>TOTALS</b>						

Under penalties of perjury, I declare that I have examined this document submitted by me in connection with my application, and to the best of my knowledge, it is true, correct, and complete. I understand that all experience listed MUST be supported by written records or file memoranda and any and all such records or memoranda are subject to inspection and review which may be required to verify this experience.

I have personally signed the appraisal report certificate, and/or, my name appears in the appraisal report as having made a significant contribution to the appraisal.

SIGNATURE OF APPLICANT  ▶	DATE
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\*You must provide your social security number pursuant to state law. Your social security number may be used for the following purposes: a) to identify you in record keeping and information exchanges with state agencies (Missouri and other states), federal agencies and other data sources; b) to make criminal history checks and to verify all information provided in the application; and c) to the Division of Child Support Enforcement of the Department of Social Services (see attachment). Discovery of false information in the application or discovery of relevant criminal history may result in denial of your application.

# TRAINEE Real Estate Appraiser Board

## Appraiser Assignment Log (Please Print)

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

Certification, License or Apprentice Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Hours Requested: *This page* \_\_\_\_\_ *Total* \_\_\_\_\_

**Applicants must enter actual hours, subject to maximums permitted in Board rules.**

Report Date	Subject Address	Report Type	Type of Property	Client	Est. Market Value	<b>A - Apprentice    S - Supervisor</b>										<b>Actual Hours</b>					
						I. Site Inspection & Descriptions	II. Bldg Inspection & Descriptions	III. Nbrhd Description & Analysis	IV. Highest & Best Use Analysis	V. Research of Comp Sales & Analysis	VI. Income Analysis	VII. Cost Analysis	VIII. Meaningful Sales Analysis	IX. Final Reconciliation	X. Other (please attach explanation)						
						A															
						S															
						A															
						S															
						A															
						S															
						A															
						S															
						A															
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						A															
						S															
						A															
						S															

**Report Type:** Appraisal Report = AR    Restricted Appraisal = RA

**Apprentices only must:** \_\_\_\_\_ **Appraisers who are not now Apprentices do not need to complete columns I thru X**

- 1) Indicate to which portions of the assignment they contributed by putting an "x" in Columns I thru X.
- 2) Prepare a separate log for each month and have their supervisors follow instructions 3 & 4 below.
- 3) For each portion of each assignment, Supervisors must indicate whether they: **P** – Had **Primary Responsibility**    **C** – **Co-appraised**    **R** – **Reviewed and Approved**
- 4) **Supervisor Name (Print)** \_\_\_\_\_ **Supervisor's Lic/Cert No.** \_\_\_\_\_  
**Supervisor Name (Sign)** \_\_\_\_\_ **Date Signed** \_\_\_\_\_

Pg No. \_\_\_\_\_  
of \_\_\_\_\_ pgs

Rev 6/08

## Trainee Experience Log

Date of Report	Property address, city state, zip	Type of Property (R1, R2, R3, G1, G2, etc.) AND Form Used		Clients Name	Description of Applicants Work Performed	Scope of Supervising Appraisers Review	Scope of Supervising Appraisers Supervision	No. of actual hours worked by trainee	Appraised Value
1/3/06 SAMPLE	123 Olive Street, Jefferson City MO 65109	SFR	1004	ABC Mortgage	Neighborhood, subject and comp data research and analyses, interior/exterior property inspection, cost/sales comparison approaches, final reconciliation	Reviewed work file and report, verified subject sales history, checked data and analyses in approached to value utilized, discussed with application, co-signed appraisal report	Completed entire appraisal process with applicant, including physical inspection of property	7	\$130,000

\_\_\_\_\_  
Trainees Signature

\_\_\_\_\_  
Supervisors Signature and License/Certification No.

# Trainee Experience Log

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\_\_\_\_\_  
**Trainees Signature**

\_\_\_\_\_  
**Supervisors Signature and License/Certification No.**