WASHINGTON STATE DEPARTMENT OF Real Estate Appraiser LICENSING Convert Continuing Education Classroom Course To On-line Course Application

Apply for temporary approval of a distance

education delivery method for an active, approved classroom course.

Upload your completed and signed application to your

provider folder in Box.com.

For questions or language help email: reeducation@dol.wa.gov

Course description

TYPE OR PRINT Course title		
Number of clock hours	Active traditional classroom course approval number	Course expiration date

27020-APPLICATIONS

Course provider information

Name of provider				
Contact name		Contact email		
How do students contact you for enrollment?				
10-digit phone number	Email			
Website				

Course satisfaction requirements

Answer the following		
1. Is the educational offering under consideration currently approved for traditional classroom presentation and is the material the same?	Yes	No
2. Is the platform used for this distance education course live and interactive?		
If "Yes," what is the platform?		
3. Does the instructor verify photo ID of the students?		
4. Do you have a system in place for the instructor to maintain an attendance roster, which includes verifying 100% classroom attendance?		
If "Yes," describe your system (such as, taking attendance at various times during the course).		
E. If a qualifying advantion course, describe the method to be used to conduct the required prestores	J	

5. If a qualifying education course, describe the method to be used to conduct the required proctored exam and the method that will be used to verify the student's ID. *"See attached" is not acceptable.*

6. Describe consistent and regular interactive events appropriate to the delivery method. The interactive elements must be designed to promote student involvement in the learning process and must directly support their achievement of the course learning objectives. *"See attached" is not acceptable.*

I declare under penalty of perjury under law of Washington that the foregoing is true and correct.

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Signature

TYPE or PRINT Name

Date and place signed

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