



**APPRAISER APPRENTICE PERMIT APPLICATION**  
*Doc #175*

**Submit the following with your application to the above address (Incomplete applications will be returned.):**

- Check or Money order in the amount of \$320 payable to **LLR- SC Real Estate Appraisers Board**. Fees are non-refundable. A returned check fee of up to \$30, or an amount specified by law, **may** be assessed on all returned funds.
- Copy of drivers license, state issued ID or passport
- Certificates of Completion for the required QE1, QE2 and QE3 National Approved USPAP Course, taught by an AQB Certified USPAP instructor.
- Certificates of Completion for applicant and applicant’s supervisor for Board approved trainee/supervisor course.
- Nonresidents of South Carolina should also complete the Consent to Jurisdiction form which can be located on the Board’s website.

**APPLICANT INFORMATION:**

SC Appraiser License Number (current or expired): \_\_\_\_\_

**\*\*\*You must not engage in, conduct or advertise as an appraiser apprentice until you are officially permitted by the Board.**

Full Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street, City, State & Zip Code)

Mailing Address: \_\_\_\_\_  
(If different than above)

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Race: (for statistical purposes only) \_\_\_\_\_ Gender: Female Male

I am a South Carolina:  Resident  Nonresident

Do you currently possess any type of appraiser certificate, license or registration in another state?  
 Yes  No

If “yes”, list state(s) and license number(s). \_\_\_\_\_

**BUSINESS INFORMATION:**

Proposed Supervising Appraiser: \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street, City, State & Zip Code)

\_\_\_\_\_  
Supervisor’s Signature

\_\_\_\_\_  
Supervisor’s SC Appraiser License Number

**EDUCATION:**

**High School:**

School: \_\_\_\_\_ Location (city/state or country): \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Year GED Received: \_\_\_\_\_

**DISCIPLINARY HISTORY:**

If you answer “yes” to any of the below, attach details and a certified copy of the criminal plea, conviction or final order. Obtain certified copies from the clerk of court in the county where the conviction occurred, or, if a license disciplinary action, from the regulatory authority that issued the license or certification. Also attach any explanation you think the Board should consider, and if you like, letter(s) of recommendation. Your application will not be processed without these documents.

1. Have you had a professional license of any type suspended, revoked, otherwise disciplined or surrendered in South Carolina or elsewhere; or are there currently charges pending against you in connection with any professional license you hold?  Yes  No
2. Have you ever been convicted of or pled guilty or nolo contendere to a crime (other than a minor traffic offense)?  Yes  No
3. Are there any licensing disciplinary proceedings pending against you at this time?  Yes  No

**PRIVACY DISCLOSURE:**

*South Carolina Law requires that every individual who applies for an occupational or professional license provide a social security number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databanks established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.*

Other personal information collected by the Department for the licensing boards it administers is limited to such personal information as is necessary to fulfill a legitimate public purpose. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on the application may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act, and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical services.

**AFFIDAVIT**

I, \_\_\_\_\_ (please print name I have carefully read the questions in the foregoing application and have answered them completely, without reservations of any kind, and I declare that all statements made by me herein are true and correct. Should I furnish any false or incomplete information in this application, I hereby agree that such act shall constitute the cause for denial or revocation of my license to practice Real Estate Appraisal in South Carolina.

In making this application to the South Carolina Real Estate Appraisers Board for an appraiser apprentice permit under the provisions of Chapter 60 of Title 40 of the Code of Laws of South Carolina, I swear (or affirm) that the applicant named herein and that the answers and information provided are true to the best of my knowledge and belief. Further, I understand that any omissions, inaccuracies or failure to fully disclose can be deemed sufficient grounds to 1) deny the taking of the examination; 2) deny applicant's request for an apprentice permit; 3) withhold renewal of applicant's permit; 4) suspend or revoke the permit; 5) take any other disciplinary action against applicant which is authorized by law.

I authorize the South Carolina Real Estate Appraisers Board to interview individuals or organizations referenced in claims for satisfying educational and/or experience requirements and to inspect the applicant's appraisal files to verify information given on this application. Further, I understand and agree that upon submission of this application, the Real Estate Appraisers Board may obtain information concerning any criminal convictions. I hereby authorize any and all law enforcement departments, agencies and officials to release to the South Carolina Real Estate Appraisers Board any and all criminal history information, and further release said departments, agencies and officials from all liability. I agree to supply fingerprints for a criminal background check if requested.

I further certify that I have read and am familiar with the South Carolina Real Estate Appraiser Registration, License, and Certification Act and any Regulations promulgated by the South Carolina Real Estate Appraisers Board, and in the event I become permitted, agree to obey said Laws and Regulations.

**CERTIFYING STATEMENT:**

I, \_\_\_\_\_, am the person described and identified, have carefully read the questions in the foregoing application and have answered them completely, without reservations of any kind, and I swear or affirm that all statements made by me herein are true and correct. Should I furnish any false or incomplete information in this application, I hereby agree that such act shall constitute the cause for denial or revocation of my license to practice Real Estate Appraisal in South Carolina.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Print Name

Notary Public for: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



STATE OF SOUTH CAROLINA  
DEPARTMENT OF LABOR, LICENSING AND REGULATION  
**VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES**  
**AFFIDAVIT OF ELIGIBILITY**



Pursuant to Section 8-29-10, *et seq.* of the South Carolina Code of Laws (1976, as amended), the Department of Labor, Licensing and Regulation must verify that any person who applies for a South Carolina license is lawfully present in the United States. Complete and sign this affidavit of eligibility. The information provided is subject to verification.

**Section A: LAWFUL PRESENCE in the United States.**

The undersigned \_\_\_\_\_, of \_\_\_\_\_  
(Print clearly First, Middle, and Last name) (Home Address, City, State, and Zip Code)  
being first duly sworn deposes and states as follows:

**Check only one box:**

1.  I am a United States citizen; or

2.  I am a Legal Permanent Resident of the United States eighteen years of age or older; or

3.  I am a Qualified Alien or non-immigrant under the Federal Immigration and Nationality Act, Public Law 82-414, eighteen years of age or older, and lawfully present in the United States.

4.  Other: \_\_\_\_\_ Please submit any documentation that supports this status.

Date of Birth: \_\_\_\_\_

Alien Number: \_\_\_\_\_ I-94 Number: \_\_\_\_\_

**(If you checked number 2, 3, or 4 you must attach a copy of your immigration documents. See instruction sheet for a list of accepted immigration documents.)**

**Section B: ATTESTATION.**

**I understand** that in accordance with section 8-29-10 of the South Carolina Code of Laws, a person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall, in addition to other sanctions imposed by this State or the United States, be guilty of a felony, and upon conviction must be fined and/or imprisoned for not more than 5 years (or both).

**I understand** that the representations made in this Affidavit shall apply through any license(s) or renewals issued, and that I shall have an affirmative duty to immediately advise the Department of Labor, Licensing and Regulation of any change of my immigration or citizenship status.

**I swear and attest the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension, or revocation of a license, certificate, registration or permit.**

\_\_\_\_\_  
Signature of Affiant

SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Print Name

Notary Public for \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

## INSTRUCTION SHEET FOR COMPLETING AFFIDAVIT OF ELIGIBILITY

### **CHECK box 1:**

If you are a United States Citizen by birth or naturalization

### **CHECK box 2:**

If you are a Legal Permanent Resident and you are not a U.S. Citizen, but are residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant.

**PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.**

### **CHECK box 3:**

If you are a Qualified Alien. You are a Qualified Alien if you are:

An alien who is lawfully admitted for residence under the INA.

An alien who is granted asylum under Section 208 of the INA.

A refugee who is admitted to the United States under Section 207 of the INA.

An alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year.

An alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3).

An alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

An alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980.

An alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

**PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.**

### **ACCEPTED IMMIGRATION DOCUMENTS:**

Unexpired Reentry Permit (I-327)

Permanent Resident Card or Alien Registration Receipt Card With Photograph (I-551)

Unexpired Refugee Travel Document (I-571)

Unexpired Employment Authorization Card Which Contains a Photograph (I-766)

Machine Readable Immigrant Visa (with Temporary I-551 Language)

Temporary I-551 Stamp (on passport or I-94)

I-94 (Arrival/Departure Record) in Unexpired Foreign Passport

I-20 (Certificate of Eligibility for Nonimmigrant, F-1, Student Status)

DS2019 (Certificate of Eligibility for Exchange Visitor, J-1, Status)