

UNIFORM REQUEST FOR RECERTIFICATION CREDIT

This form was developed for your convenience in reporting continuing education to various appraisal organizations. It does not imply automatic acceptance by any organization of an educational program. Each group retains its own recertification requirements and procedures for requesting credit. A copy of the program brochure or outline may be required.

1. This form must be completed in its entirety. Please type or print.
2. Please submit a copy to each organization from which you are requesting credit.
3. It is suggested that you keep a photocopy of each form submitted.

RI Association of Assessing Officers

ORGANIZATION TO WHICH SUBMITTED

DESIGNATION

MEMBER NUMBER

MEMBER NAME

NUMBER OF INSTRUCTIONAL HOURS

Vision Government Solutions
SPONSORING ORGANIZATION

Virtual Webinar via ZOOM
PROGRAM LOCATION

April 28-29, 2021
DATE

Vision 2021 National User Group Teleconference
PROGRAM

EVIDENCE OF COMPLETION (SIGNATURE OF INSTRUCTOR OR PROGRAM OFFICIAL)

I certify that I have completed the above described professional activity. I am aware that any misrepresentation by me may become subject to disciplinary action.

SIGNATURE OF MEMBER

DATE

Vision 2021 National User Group Teleconference
TITLE OF EDUCATIONAL PROGRAM DESCRIBED ABOVE

FOR OFFICE USE ONLY

MEMBER NAME

MAILING ADDRESS

CITY

STATE/PROVINCE

ZIP CODE