

# Attendance Certificate for Appraiser Continuing Education

\_\_\_\_\_  
Licensee Name

\_\_\_\_\_  
Licensee File Number

*This Licensee has successfully completed   hours   of continuing education in:*

\_\_\_\_\_  
*Attending 100% of the course.*

\_\_\_\_\_  
Date of Course

\_\_\_\_\_  
Location

\_\_\_\_\_  
Time

\_\_\_\_\_  
Verifier Name

\_\_\_\_\_  
Provider Name

\_\_\_\_\_  
Signature of Verifier

\_\_\_\_\_  
Provider Address

\_\_\_\_\_  
Certification Number