MINNESOTA
STATE BOARD OF ASSESSORS
Application for Provisional Status

IMPORTANT: Print or Type ABOVE the Line.

PERSONAL DATA: Collection of data relating to gender, date of birth and residency is required by MN Statute 214.07 (i)

_____ _____ ___ _____ - ____ -_____
Last Name First Name MI Social Security Number

_____ _____ ____ _____
Home Address (Street and Number) City State Zip code

_____ (___) _____
County of Residence Home Phone Number

Date of Birth (M/D/Y):_____ Gender (Circle): Male Female

Have you ever been convicted of a felony? (Circle): Yes No (If yes, give details on back of form)

Appraiser License Number (if applicable):_____ E-mail:_____

ASSESSMENT COURSES

Name of Course	**Sponsored by**	**Dates Attended**
(1) _____	_____	_____
(2) _____	_____	_____
(3) _____	_____	_____
(4) _____	_____	_____

I certify that the above information is true and correct to the best of my knowledge.

I agree to adhere to the Code of Ethics and Standards of Professional Conduct as adopted by the MN State Board of Assessors.

_____ _____
Signature of Applicant Date

Have you enclosed?

Copies of course completion certificates. Photocopy of Appraisers License (if applicable).

Return with this application form to:

Minnesota State Board of Assessors
Mail Station 3340
St. Paul, MN 55146-3340
Phone: (651) 556-6086
Fax: (651) 556-3128

Applications are acted upon at the next scheduled Board meeting following receipt of the application. There is no fee for provisional status applications.

Revised: July 2006