EXPERIENCE LOG FORM NEBRASKA REAL PROPERTY APPRAISER BOARD

TRAINEE/APPLICANT:

SUPERVISOR'S NAME & CREDENTIAL #

- ALL SUPERVISORS MUST BE CERTIFIED.
- **LOGS MUST BE IN CHRONOLOGICAL ORDER**
- PLEASE HIGHLIGHT AND/OR MARK 2-4 UNIT PROPERTIES
- IF ADDITIONAL SPACE IS NEEDED ADD AN ADDITIONAL SHEET WITH PROPERTY ADDRESS LISTED WITH DESCRIPTION OF WORK.
- THE TRAINEE MUST FILE A SUPERVISOR/TRAINEE FORM W ITH THE REAL PROPERTY APPRAISER BOARD FOR EACH SUPERVISOR.
- FILL OUT THIS FORM IN IT'S ENTIRETY. CHECK WHICH BOXES APPROPRIATELY DESCRIBES THE CHARECTERISTICS THE REPORT PERTAINS TO.

PROPERTY:
R: RESIDENTIAL
C: COMMERCIAL
A: AGRICULTURE

DATE APPRAISAL REPORT SIGNED	NAME OF CLIENT AND PROPERTY IDENTIFICATION (Legal Description or Address)	DESCRIPTION OF TRAINEE'S WORK PERFORMED	SCOPE OF SUPERVISING APPRAISER'S REVIEW	Residential			Approaches			USPAP COMPLIANT	TRADITIONAL CLIENT	PROPERTY: R, C, A	APPLICANT HOURS	SUPERVISOR HOURS
				<20 YEARS	>20 YEARS	2-4 FAMILY	SALES	COST	INCOME					
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
			Property Inspected YES NO	☐	☐	☐	☐	☐	☐	☐	☐			
												TOTAL		

LOGS WHICH ARE NOT SUBMITTED IN CHRONOLOGICAL ORDER WILL NOT BE REVIEWED BY THE BOARD.
This form, if altered, will be considered invalid

Date: _____ **Supervisor's Signature:** _____

Date: _____ **Applicant's Signature** _____