

## Continuing Education Logbook – Non-Appraisal Institute Network Programs

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Name Social Security or Account Number

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State of Residence Phone E-mail

PROGRAM TITLE*	DATE(S) OF PROGRAM (Start to End)	TYPE (Classroom, distance learning, teaching, writing)	PROVIDER/SCHOOL/ INSTRUCTOR	CREDITABLE TOPIC COVERED	NUMBER OF HOURS

<b>Non-AI Hours</b>	<b>AI Hours</b>	
<b>Total Hours</b>		

I attest to the accuracy and validity of all information contained on this form. I agree to provide proof of program attendance and verification of hours if requested by the Appraisal Institute.

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Signature

**\*You are not required to record Appraisal Institute programs, however, we encourage that you do. Simply indicate that the program is an Appraisal Institute sponsored program in the box next to the program title. Return to: Designated Member Services Center, [designated@appraisalinstitute.org](mailto:designated@appraisalinstitute.org) or fax 312-335-4415.**