

DBPR RE-2060 – Request for Change of Status – Registered Trainee Appraiser

STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND  
PROFESSIONAL REGULATION

1940 North Monroe Street  
Tallahassee, FL 32399-0750  
Customer Contact Center: 850.487.1395  
FAX: 850.488.8040  
[www.MyFloridaLicense.com](http://www.MyFloridaLicense.com)

CHECK ACTION REQUESTED	
<b>Action Requested</b>	<input type="checkbox"/> Request inactive status
<input type="checkbox"/> Designate a trainee's primary supervisor	<input type="checkbox"/> Terminate a trainee's primary supervisor
<input type="checkbox"/> Designate a trainee's secondary supervisor	<input type="checkbox"/> Terminate a trainee's secondary supervisor

REGISTERED TRAINEE APPRAISER
Registration Number
Registrant Name

PRIMARY/SECONDARY SUPERVISOR OF REGISTERED TRAINEE APPRAISER INFORMATION	
Supervisor's License/Certification Number	Supervisor's Designation:
<input type="checkbox"/> Primary Supervisor <input type="checkbox"/> Secondary Supervisor	<input type="checkbox"/> Certified Residential Appraiser <input type="checkbox"/> Certified General Appraiser
Primary/Secondary Supervisor Name	Primary Supervisor's Contact Information:
	Telephone number: _____
	E-mail address: _____

I affirm that I have provided the above information completely and truthfully to the best of my knowledge.	
Primary Supervisory Appraiser Sign Here: _____ <b>Required for all requests.</b>	Date: _____
Secondary Supervisory Appraiser Sign Here: _____ <b>Required to Designate or Terminate Trainee's Secondary Supervisor</b>	Date: _____
Registered Trainee Appraiser Sign Here: _____ <b>Required to Designate Primary or Secondary Supervisor or to Request Inactive Status</b>	Date: _____