



State of Oklahoma
REAL ESTATE APPRAISER BOARD
 400 NE 50th St. Oklahoma City, Oklahoma 73105-1816
 Phone: (405) 521-6636 Fax: 522-6909 Email: reabadmin@oid.ok.gov
 Website: www.reab.oid.ok.gov

RECEIVED
 Oklahoma Insurance Dept.

MAR 31 2026

Real Estate Appraiser Board

REQUEST FOR APPROVAL OF COURSE FOR CONTINUING EDUCATION CREDIT

SEE INSTRUCTIONS AT BOTTOM LEFT; ALL APPLICATIONS MUST INCLUDE PROPER REMITTANCE

Name and Address of Provider/Sponsor Submitting Course: <u>Green Mountain eLearning</u>	Name and Telephone Number of Contact Person: Name: <u>Connie Covey</u> Telephone: <u>8024337433</u> Fax: _____ Email address: <u>info@greenmountainelearning.com</u>
Provider #: APP <u>205</u>	

Course Title/Name: Valuation Bias and Fair Housing Laws and Regulations

Standing Course
 One-time or Limited-Period Seminar

If One-time or Limited-Period Seminar:
 Date of Course: _____ Start Time: _____
 Location: _____
 City: _____

Primary Instructor: David Hampton Thomas

Method of Instruction <input type="checkbox"/> Classroom/Lecture <input type="checkbox"/> Seminar <input checked="" type="checkbox"/> On-line <input type="checkbox"/> Other: _____	Method of Determining Successful Completion <input type="checkbox"/> Final Examination (or a series of examinations) – Proctored <input type="checkbox"/> Completed Text <input checked="" type="checkbox"/> Roster <input type="checkbox"/> Attendance Monitored by Sign-in/Sign-out Sheet <input type="checkbox"/> Other: _____
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Total Hours Requested: 7

Has this course been approved by the Appraiser Qualifications Board (AQB) Course Approval Program? Yes. No.

Course Description: Describe General Content of Course:
 This course fulfills the 7 hour mandatory requirement for Valuation Bias and Fair Housing CE.

Text References: Name Published Text(s) to be used:

Name & Signature of Individuals Authorized to Sign Certificates of Completion:

David Hampton Thomas
 Name (Typed or Printed) _____ Signature David Hampton Thomas
 **
 Connie J Covey
 Name (Typed or Printed) _____ Signature Connie J Covey
 **
 ** Facsimile signatures acceptable.

"To the best of my knowledge, information, and belief, this providing or sponsoring entity owns or otherwise has the right to the use of course materials to be used in this course, and use of these materials does not infringe on any copyright or other rights of any other parties."

Connie J Covey
 Name (Typed or Printed) _____ Signature Connie J Covey
 Title: Owner Date: March 31, 2026

- Use this form to request approval of courses for continuing education.**
- Forward original form to OREAB. Do not fax.
 - Attach *one* copy of the course outline that includes a time schedule, topics and learning objectives.
 - Attach *one* copy of all course materials, including published textbooks and examinations to be used in this course.
 - Submissions must be received at least seven business days prior to a Board meeting or it will be held over until the following meeting.
 - Course owners: attach AQB and IDECC approval letters.
 - Secondary Providers: include a copy of the course owner-secondary provider agreement, AQB approval letter (if applicable), and provider specific IDECC approval letter.
 - AQB approved course submittals must include a Twenty Dollar (\$20.00) non-refundable fee.
 - Course submittals *not* approved by AQB must include a Fifty Dollar (\$50.00) non-refundable fee.

OREAB USE ONLY: APP 205 COURSE 907

Disapproved.
 Approved for 7 hours of continuing education.

Course Expiration Date: 3-25-2029

By: [Signature] Approval Date: 3-31-2026

Check No.: _____ Check Date: 3-31-2026
\$20.00

PAYMENT RECEIVED

MAR 31 2026

INSURANCE COMMISSIONER
 REAL ESTATE APPRAISER BOARD

REA-CE2 (2002)
 (Previous editions obsolete)