AMERICAN SOCIETY OF AGRICULTURAL APPRAISERS

P.O. Box 186 Twin Falls, Idaho 83303

Toll Free: 1-800-488-7570 • **Phone**: (208) 733-2323 **Fax**: (208) 733-2326 • **E-Mail**: ag@amagappraisers.com

MEMBERSHIP APPLICATION

Please write plainly or print.

This application becomes a permanent record if you are accepted as a member.

Equal Opportunity Policy: It is the policy of the American Society of Agricultural Appraisers to recruit qualified personnel without discrimination because of Race, Color, Religion, Age, Sex, National Origin, or Handicapped condition and to give no preferential treatment to any applicant.

Name: (Last)	(First)	(Middle)
Home Address:		
	State:	Zip:)
		one: ()
Email Address:		
Mailing Address:		
City:	State:	Zip:
Do you have a valid drive ☐ Yes ☐ No		
Number:	State:	
Date of Birth (mm/dd/yyyy):	:	
Expiration Date (year):		
Do you have any relative ☐ Yes ☐ No	s associated with this society?	
If yes, please explain.		
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STATEMENT OF HEALTH Do you have any physical condition which may limit your ability to perform an appraisal? ☐ Yes ☐ No If yes, please explain. **PERSONAL** Have you ever been expelled from or given an official reprimand by a professional organization or been convicted of a felony related to business practices or ethics? ☐ Yes ☐ No If yes, please elaborate. (Enclose a separate statement if necessary.) Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, please elaborate. (If you have been convicted of a felony, the nature of the felony and the length of time since conviction will be important considerations. If you have been convicted of a felony, you will not be automatically disqualified, and you will be given the opportunity to explain any convictions that may adversely affect membership.) List professional organizations, special interests, or hobbies.

EDUCATIONAL DATA

School Attended	Name	City	State	Last Grade Completed (circle one)	Major	Degree
High School				9 10 11 12		
Community College				1 2		
College or University				1 2 3 4 5 6 7 8		
Trade School/ Apprenticeship				1 2 3 4		

EMPLOYMENT RECORD

List employment for the last 10 years, beginning with last or present job.

Company Name:		
Street Address:		
City & State & Zip:		
Telephone:		
Job Title:		
Supervisor:		
Dates Employed:	Start Date (mm/yyyy):	End Date (mm/yyyy):
Reason for Leaving:		
Company Name:		
Street Address:		
City & State & Zip:		
Telephone:		
Job Title:		
Supervisor:		
Dates Employed:	Start Date (mm/yyyy):	End Date (mm/yyyy):
Reason for Leaving:		

EMPLOYMENT RECORD (continued)

Company Name:			
Street Address:			
City & State & Zip:			
Telephone:			
Job Title:			
Supervisor:			
Dates Employed:	Start Date (mm/yyyy):	End Date (mm/yyyy):	
Reason for Leaving:			
Company Name:			
Street Address:			
City & State & Zip:			
Telephone:			
Job Title:			
Supervisor:			
Dates Employed:	Start Date (mm/yyyy):	End Date (mm/yyyy):	
Reason for Leaving:			
AGRICULTURAL E		DETAILED DESCRIPTION OF YOUR RM EQUIPMENT AND/OR LIVESTOCK.	

PERSONAL REFERENCES

Give four references (<u>not relatives</u>) who can vouch for your ethics, credibility and competence. It is important to type or print clearly and be sure to include complete contact information (<u>including zip code and fax number if available</u>).

Name:	
Street Address:	
City & State & Zip:	
Telephone:	
Fax:	
Name:	
Street Address:	
City & State & Zip:	
Telephone:	
Fax:	
Name:	
Street Address:	
City & State & Zip:	
Telephone:	
Fax:	
Name:	
Street Address:	
City & State & Zip:	
Telephone:	
Fax:	
PLEASE FILL IN I ACTUAL EXPERI LIVESTOCK APPI List the particular b	LYING FOR BOTH LIVESTOCK AND FARM EQUIPMENT DESIGNATIONS, BOTH THE LIVESTOCK AND FARM EQUIPMENT SECTIONS THAT YOU HAVE ENCE WITH, NOT JUST A KNOWLEDGE OF. LICANTS (International Society of Livestock Appraisers) reeds of livestock you are familiar with:
1	2
3	4
_	

	8
	can Society of Farm Equipment Appraisers) e worked with or are familiar with, including any
	2
	4
	6
ease check any equipment that you hav Row Crop	ve worked with or are familiar with:
Hay Equipment	
Light Construction	
-	
Heavy Equipment Truck and Trailer	
Truck and Trailer	
representative before signing. I author Association Headquarters if you do not schools or persons named as reference employment or educational record. I a liable in any respect if a membership iterminated because of falsity of staten questionnaire. (In the event of my memory Appraisers, I will comply with all of the communications distributed to all memory associations.)	,
· ·	ne on this application are true and complete to the withheld nothing that would, if disclosed, affect this
I hereby acknowledge that I have read and that I agree to abide by them.	d the above statement, that I understand the same;
Signature	Date

MEMBERSHIP FEE SCHEDULE

American	Society of Farm E	Equipment Appraisers:
\$395.00	Certification Fee:	Must be mailed with application, along with signed Code of Ethics.

American Society of Livestock Appraisers:

Please return this portion with your payment.

\$395.00 Certification Fee: Must be mailed with application, along with signed Code of Ethics.

Dual Membership: American Society of Farm Equipment Appraisers and International Society of Livestock Appraisers.

\$595.00 Certification Fee: Must be mailed with application, along with signed Code of Ethics.

Note: In all cases, if your application for membership is denied, your processing fee will be completely refunded. Annual dues are \$100.00 per member (becomes due twelve [12] months after certification). If you have any questions regarding the above membership fees, please call the Association office Toll Free at 1-800-488-7570.

Membership fees for the American Society of Agricultural Appraisers are deductible as ordinary and necessary business expenses. SEC 6113 IRS. CODE

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