



## Advanced Designation Application

To apply for an advanced designation, complete this form, attach a copy of your official Illinois Department of Revenue transcript and e-mail both documents to registrar@ipaieducation.org or hard copy mail to:

Illinois Property Assessment Institute  
ATTN: Registrar  
706 Oglesby, Suite 120, Normal, IL 61761

Name \_\_\_\_\_  
(First) (Middle) (Last)

Mailing Address \_\_\_\_\_  
(Street) (City) (Zip Code)

Employer \_\_\_\_\_ Applicant's Title \_\_\_\_\_

Phone Number (W) \_\_\_\_\_ Email Address \_\_\_\_\_

County \_\_\_\_\_ Township \_\_\_\_\_  
(If applicable)

Years of Service \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone Number \_\_\_\_\_

### Designation Seeking

CIAO-I \_\_\_\_\_ CIAO-S \_\_\_\_\_ CIAO-M \_\_\_\_\_

### Coursework

(Attach a copy of your official Illinois Department of Revenue transcript)

<b>Administration Hours</b>	_____
<b>Commercial Hours</b>	_____
<b>Residential Hours</b>	_____
<b>Theory Hours</b>	_____
<b>Statistics Hours</b>	_____
<b>Land Hours</b>	_____
<b>Total Hours</b>	_____

---

### Office Use Only:

Date Received \_\_\_\_\_

Executive Director's Approval \_\_\_\_\_

Test Score \_\_\_\_\_

Applicant Notified of Approval \_\_\_\_\_

Date of Award \_\_\_\_\_

Testing Date \_\_\_\_\_

Newspaper Notified \_\_\_\_\_