

**STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
REAL ESTATE DIVISION**

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APPRAISER INTERN TERMINATION NOTICE

To be completed by licensed Appraiser and acknowledged by subject Intern.

***** NOTE: INTERN IS NOT ALLOWED TO HAND CARRY HIS/HER REGISTRATION CARD *****

This is to notify you that the below named Intern(s) has been terminated from my association.

Termination Date: _____ Registration Card Number: _____

Name of Intern: _____

Residence: _____
No. & Street *City* *State* *Zip*

Mailing Address: _____
No. & Street / P.O. Box *City* *State* *Zip*

Employment was considered: Full-Time Part-Time

Impression of his / her character: _____

Circumstances surrounding termination of employment:

I hereby acknowledge that I have notified the terminated Intern of this action pursuant to the provisions of NRS 645C.410.

Print Name of Licensed Appraiser

License Number

Signature of Licensed Appraiser

Firm Name

Signature of Terminated Intern

[ATTACH INTERN REGISTRATION]