



ARCHITECT BY COMITY APPLICATION INSTRUCTIONS

Application by comity is for individuals currently licensed in another jurisdiction who are seeking licensure in Minnesota as an Architect. This application determines your **eligibility** for licensure. Applicants not already licensed in any state should [apply online for an "initial architect license"](#) (see Board [website](#) for details).

IMPORTANT! Note the following application requirements (more than one may apply to your situation):

- If you were initially licensed **on or after January 1, 1991**, you must have an NAAB-accredited or equivalent degree.*
- If you were initially licensed **on or after March 1, 1997**, you must show that you have completed NCARB IDP/AXP.
- If you were initially licensed **before January 1, 1991**, you must meet the Minnesota requirements for education, examination and experience in effect when you were initially licensed (see www.revisor.mn.gov/rules/?view=archive, select the relevant year, then select the link to the left of "Chapters 1800 to 1805."

See [MN Rules 1800.0800](#), [1800.0850](#), and [1800.1000-1100](#) for additional information/requirements.

IF YOU HAVE AN NCARB RECORD:

1. Complete [pages 1, 3 and 4](#), skipping page 2 (Parts B-D).
2. Request that your NCARB Record be sent to Minnesota: Log into My NCARB (my.ncarb.org/Login). Go to "NCARB Record," select "Request Transmittal of NCARB Record," and follow the instructions.
3. Complete Section A of the Verification of Examination/Licensure form and submit it to your licensing authority for completion. Completed forms must be sent directly from the licensing authority to aelslagid@state.mn.us or by mail.

NOTE: Some states charge a fee for verification of your records.

Do **NOT** complete the Experience Reference form. Your NCARB Record provides the needed information.

IF YOU DO NOT HAVE AN NCARB RECORD:

1. Complete **ALL** parts of [pages 1-4](#).
2. Request that your educational institution(s) send an official transcript, showing the degree awarded and the date of graduation. Have the institution send the transcript directly to the Board by mail (see address above) or by email (aelslagid@state.mn.us).
3. Complete the "Applicant" portion of the [Verification of Examination and/or Licensure Form](#) for any state in which you hold a valid license and (if different) the state that holds your ARE® Exam results. Send them both pages of that form, along with any fee they may require* and a stamped envelope addressed to the Minnesota Board (see address above).
** Some states charge a fee for verification of your records. To avoid delay in processing your request, you may wish to contact your state to determine if there is a fee or any additional instructions.
4. Complete the "Applicant" portion of the [Experience Reference Form](#) and send to your supervisor(s) for completion. See that form for instructions.

*If you were foreign-educated or have a degree that is not NAAB-accredited: Education Evaluation Services for Architects (EESA) is a partnership between National Architectural Accrediting Board (NAAB) and NCARB. This program enables you to have your non-accredited degree assessed to determine if it meets requirements for licensure and identify what, if any, deficiencies remain to be satisfied. An NCARB Record must be established for an EESA-NCARB evaluation. Contact NCARB for more information.

Payment of the **\$75 application fee** is by check or money order (US funds, made payable to **MN Board of AELSLAGID**). The Board is unable to accept cash, credit card, or other electronic forms of payment for the application fee. Submit the application and payment by mail (no emails) to the address listed above.

Applications without payment **ENCLOSED** will be returned.

Once your application, including required documentation, is received, the Board will review it.

You will be notified by letter whether your application was approved or denied.

If your application is approved, you will receive instructions for obtaining your professional license.

If you have questions regarding your application, call the Board office at 651-296-2388.



FOR BOARD USE ONLY
Application #

ARCHITECT BY COMITY APPLICATION

Application Fee: \$75

Payment of the **\$75 application fee** is by check or money order (US funds, made payable to **MN Board of AELSLAGID**). The Board is unable to accept cash, credit card, or other electronic forms of payment for the application fee. Applications without payment **ENCLOSED** will be returned.

FOR BOARD USE ONLY
License #
Date Licensed Issued
Application Fee \$

Part A: Applicant Information (All fields are required unless otherwise noted.)

Note: If any of the information below changes after you submit this application, you must notify the Board immediately.

- Are you or your spouse an active duty military member? Or have you left service in the last two years with an honorable or general discharge? Yes (Priority processing) No
- The address below is my (check one): Home Business If **business**, list name: _____

3. General/contact information (your **full legal name** is required):

Full Legal Name _____ I have no legal middle name

(Legal FIRST Name) (Legal MIDDLE Name) (Legal LAST Name) (Suffix)

Former Name _____ US SS # _____
(if applicable) (or ITIN, if no US Social Security #)

Street Address _____ Gender Male Female
(no PO Boxes)

City _____ State/Province _____ Birth Date _____
(MM/DD/YYYY)

ZIP/Postal Code _____ Country (if not USA) _____ Phone # _____

- Have you ever had a license/certificate in any jurisdiction for **any** of the professions regulated by the Board disciplined, denied, surrendered, suspended or revoked? Yes* No
 * **If yes**, attach a statement of explanation.
- Will you be submitting an NCARB Record?
 Yes — **skip to Parts E and F**, and complete the **Verification of Examination/Licensure Form**.
 No — complete **Parts B-F**, the **Experience Reference Form** and **Verification of Examination/Licensure Form**.

NOTICE OF COLLECTION OF PRIVATE DATA

In accordance with the Minnesota Government Data Practices Act (Minnesota Statutes §13.04, Subd. 2), the Board is required to inform you of your rights as they pertain to private data collected from you on this application for licensure. The data you furnish on the application will be used by the Board to assess your qualifications for licensure. The collection of your social security number by the Board is required by both federal and state laws. You are not legally required to provide this data; however, if you fail to do so, the Board may be unable to approve your application or issue your license.

Federal law (42 U.S.C. 666(a)(13)) requires each state to collect social security numbers at the time of application for a professional or occupational license in order to improve effectiveness of child support enforcement.

Additionally, pursuant to Minnesota Statutes §270C.72, Subd. 4 (2022) the Board must provide the Commissioner of the Minnesota Department of Revenue a list of all applicants, including name, address and social security number or Individual Tax Identification Number (ITIN), each calendar year for the purpose of identifying individuals owing delinquent taxes. Pursuant to Minnesota Statutes §13.41, Subd. 2 (2022), all application data, except name and designated address, are private data until licensure is granted. When licensure is granted, all data, except social security number, become public record.

The Board will not share your private data with other persons or agencies unless it is required by law.

Note: If you answered “yes” to Question 5 in Part A, skip to page 3 (Part E).

Applicant Name: _____

Part B: Record of Licensure

List all states (other than MN) or countries in which you **currently** hold an architect’s license. Attach a sheet if needed.

Note: If you **do not** already hold an architect license in another state, you cannot apply by comity. Instead [apply online for an “initial architect license”](#) (see Board [website](#) for details).

WHERE LICENSED	LICENSE #	DATE ISSUED (MM/YYYY)	CHECK METHOD FOR EACH LICENSE			
			Written Exam—List Number of Hours:	Oral Exam	Exemption (Grandfather Clause)	Comity

Part C: Education

1. List all undergraduate and graduate degrees. **You must submit a final, official transcript** from each educational institution. Transcripts must arrive in a sealed envelope from the institution.

College/University Attended	City, State, Country	Graduation Date (mm/yyyy)	Degree Received

2. If none of the degrees above are from an NAAB-accredited institution, are you submitting the required degree evaluation ([see page Instr-1](#))? Yes No N/A

Part D: Experience References (Qualifying Experience)

Note: The amount of qualifying experience you must document depends upon the requirements in place in Minnesota at the time of your initial licensure (see [Instructions](#)). **Qualifying experience must be verified by a licensed architect.**

1. List those supervisors verifying your experience. Provide as many names as necessary to verify all the required experience. Attach sheets if necessary. List in chronological order of your employment.

Supervisor’s Name	Business Name & Address	Supervisor’s License Number	Issuing State	Your Employment Dates

2. Provide an [Experience Reference Form](#) (included in this application packet) with the “Applicant” (your) portion completed to **all those listed above**. See that [form](#) for further instructions.

Part E: Rules of Professional Conduct (MN Rules 1805.0100-1805.1600)

Read below, then sign and date. Keep a copy for your records.

1805.0100 PROFESSIONAL CONDUCT.

Subpart 1. Purpose. This chapter on professional conduct is adopted for the purpose of implementing the laws and rules governing the practice of architecture, engineering, land surveying, landscape architecture, and geoscience, and the use of the title of certified interior design.

Subp. 2. Scope. This chapter is applicable to and binding upon each person, corporation, or partnership subject to the regulatory jurisdiction of the board.

Subp. 3. Professional responsibility. A. The professional conduct of a licensee or certificate holder must be in accordance with this chapter. B. When providing professional services, the licensee's or certificate holder's primary responsibility is the protection of the public's health, safety, and welfare.

1805.0200 OBLIGATION TO PROVIDE FULL DISCLOSURE.

Subpart 1. Public statements. A. A licensee or certificate holder shall avoid any act that may diminish public confidence in the profession and shall, at all times, conduct himself or herself, in all relations with clients and the public, so as to maintain its reputation for professional integrity. B. A licensee or certificate holder shall be objective and truthful in all professional documents, including but not limited to plans, reports, statements, or testimony. The licensee or certificate holder shall consider relevant and pertinent information in such documents or testimony and express professional opinions publicly only when they are founded upon an adequate knowledge of the facts and a competent evaluation of the subject matter.

Subp. 1a. Credit. In connection with the work for which the licensee or certificate holder is claiming credit, the licensee or certificate holder shall accurately represent the licensee's or certificate holder's qualifications, education, and scope of responsibility for the work. The licensee or certificate holder shall also accurately represent the qualifications, education, and scope of responsibility of any employer, employees, or associates.

Subp. 2. False statements and nondisclosure. A licensee or certificate holder shall not make a false statement or fail to disclose a material fact requested in connection with an application for certification, licensure, or renewal in this state or any other state.

Subp. 3. Knowledge of unqualified applicants. A. A licensee or certificate holder shall not endorse an application for certification or licensure of another person known by the licensee or certificate holder to be unqualified in respect to character, education, experience, or other relevant factor. B. A licensee or certificate holder possessing knowledge of an applicant's qualifications for examination, licensure, or certification shall cooperate with the applicant and the board by responding regarding those qualifications when requested to do so. A licensee or certificate holder shall provide verification of employment and experience earned by an applicant under supervision if there is reasonable assurance that the facts to be verified are accurate. A licensee or certificate holder shall not knowingly sign a verification document that contains false or misleading information.

Subp. 3a. Knowledge of improper conduct by others. A licensee or certificate holder possessing knowledge of any acts prohibited by this chapter, chapter 1800, or Minnesota Statutes, sections 326.02 to 326.15, by a licensee, certificate holder, or unlicensed individual shall report such knowledge to the board. Upon questioning by the board or its representative during an official inquiry into an alleged act, a licensee or certificate holder shall disclose any knowledge the licensee or certificate holder may have in the matter.

Subp. 4. General prohibitions. A licensee or certificate holder shall not: A. circumvent a rule of professional conduct through actions of another; B. engage in illegal conduct involving moral turpitude; C. engage in conduct involving dishonesty, fraud, deceit, or misrepresentation; D. engage in conduct that adversely reflects on the licensee's fitness to practice the profession; or E. permit the licensee's or certificate holder's name or seal to be affixed to plans, specifications, or other documents that were not prepared by

or under the direct supervision of the licensee or certificate holder.

1805.0300 CONFLICT OF INTEREST.

Subpart 1. Employment. A licensee or certificate holder shall not accept a project where a duty to the client or the public would conflict with the personal interest of the licensee or certificate holder or the interest of another client. Prior to accepting a project, the licensee or certificate holder shall disclose to a prospective client such facts as may give rise to a conflict of interest.

Subp. 2. Compensation. A licensee or certificate holder shall not accept compensation for services relating or pertaining to the same project from more than one party unless: A. there is a unity of interest between or among the parties to the project; B. the licensee or certificate holder makes full disclosure; and C. the licensee or certificate holder obtains the express consent of all parties from whom compensation will be received.

Subp. 3. Gifts. A. Without the knowledge and approval of the client or the employer, a licensee or certificate holder shall not, directly or indirectly, solicit or accept any compensation, gratuity, or item of value from contractors, their agents, material or equipment suppliers, or other persons dealing with the client or employer in connection with the work for which the licensee or certificate holder has been retained. B. A licensee or certificate holder shall neither offer nor make any payment or gift to a government official, whether elected or appointed, with the intent of influencing the official's judgment in connection with a prospective or existing project in which the licensee or certificate holder is interested or involved.

Subp. 4. Interpretations. When acting as the interpreter of project contract documents or as the judge of contract performance, a licensee or certificate holder shall render decisions impartially, using the professional judgment of their licensed or certified discipline.

1805.0400 IMPROPER SOLICITATION OF EMPLOYMENT.

A. A licensee or certificate holder shall seek and engage in only the professional work or employment the professional is competent and qualified to perform by reason of education, training, or experience.

B. A licensee or certificate holder shall not tender any gift, pay, or offer to pay, directly or indirectly, anything of substantial value, whether in the form of a commission or otherwise, as an inducement to secure employment. A licensee or certificate holder is not prohibited from paying a commission to a licensed employment agency for securing a salaried position.

1805.0500 FALSE OR MALICIOUS STATEMENTS.

A licensee or certificate holder shall not make false or malicious statements that may have the effect, directly or indirectly, or by implication, of injuring the personal or professional reputation or business of another member of the profession.

1805.0650 COMPETENCE.

Subpart 1. Standards of competence. In practicing architecture, engineering, land surveying, landscape architecture, or geoscience, or when using the title of certified interior designer, each licensee or certificate holder shall act with reasonable care and competence and shall apply the knowledge and skill that is ordinarily applied by such professionals.

Subp. 2. Conformance with state and local laws and regulations. When providing professional services, a licensee or certificate holder shall not violate applicable state and local laws and regulations. Notwithstanding the duty of licensees and certificate holders to follow the law, in proceedings before the board, the board shall consider whether a licensee's or certificate holder's violation follows from incorrect advice on the meaning of a statute or regulation. In such a circumstance, the board shall consider the reasonableness of the licensee's or certificate holder's reliance on the incorrect advice in determining the appropriate sanction, if any, for the violation.

Subp. 3. Qualifications for performing professional services. A licensee or certificate holder shall perform professional

Printed Name

Date

Signature

services only when the licensee or certificate holder, together with those whom the licensee or certificate holder may engage as consultants, is qualified by education, training, and experience in the specific technical areas involved.

1805.0700 COMPLIANCE WITH LAWS.

Subpart 1. Violation of laws. Convictions of a felony without restoration of civil rights, or disciplinary action taken against a licensee or certificate holder by another jurisdiction, if for cause which in the state of Minnesota would constitute a violation of law or of these rules, shall be deemed to be a violation of these rules of professional conduct.

Subp. 2. Incompetence. A licensee or certificate holder adjudged mentally incompetent by a court of competent jurisdiction shall, until restored to mental competency, be deemed to be incompetent to practice the profession within the meaning of Minnesota Statutes, section 326.11, subdivision 1.

1805.0800 EMPLOYMENT PRACTICES.

A licensee or certificate holder, as an employer, shall refrain from engaging in any discriminatory employment practice prohibited by law.

1805.0900 PROFESSIONAL MISCONDUCT.

Misconduct within the meaning of Minnesota Statutes, section 326.11, subdivision 1, shall include any act or practice in violation of the rules of professional conduct in this chapter. A licensee or certificate holder shall not engage in conduct involving bribery, collusion, corruption, fraud, or malfeasance.

1805.1500 REGISTRATION.

No corporation, partnership, or other firm engaged in the practice of architecture, engineering, land surveying, landscape architecture, geoscience, or two or more of these professions, shall contract with or accept employment for professional services of an architectural, engineering, land surveying, landscape architectural, or geoscience character as defined in Minnesota Statutes, sections 326.02 to 326.15, unless a member or employee of the corporation, partnership, or other firm in responsible charge of the work is registered and licensed under Minnesota Statutes, sections 326.02 to 326.15, to practice the profession called for by the employment.

1805.1600 RESPONSIBLE CHARGE AND DIRECT SUPERVISION.

Subpart 1. Responsible charge; defined. A person in responsible charge of architectural, engineering, land surveying, landscape architectural, geoscience, or certified interior design work as used in Minnesota Statutes, section 326.14, means the person who determines and reviews design criteria, including technical aspects, advises with the client, and has direct supervision of subordinates during the course of the work and, in general, the person whose professional skill and judgment are embodied in the plans, designs, and advice involved in the work.

Subp. 2. Direct supervision; defined. A person in "direct supervision" of work as referred to in Minnesota Statutes, section 326.12, subdivision 3, means that person who is the employer, an employee of the same firm, or who is under contract to or from another firm and who is in responsible charge of the technical aspects of the architectural, engineering, land surveying, landscape architectural, geoscience, or certified interior design work in progress, and whose professional skill and judgment are embodied in the plans, specifications, reports, plats, or other documents required to be certified pursuant to that subdivision. A person in direct supervision of work directs the work of other licensees, unlicensed professionals, technicians, and clerical persons assigned to that work and is in responsible charge of the project comprising the work being supervised.

Part F: Certification Statements

to Be Affirmed by the Applicant

Read the statements, **select the appropriate true/false response**, then **sign** and **date** below.

If you answer “False” to any of the statements, you **must** enclose a statement of explanation for each checked statement. Your application is not considered complete until you provide the required explanation(s).

[MN Rule 1800.0400 Subp. 5 \(2023\)](#)

- 1. I have read and will comply with the provisions of Minnesota Statutes §§ 326.02 – 326.15 (2022) and the Rules and Regulations adopted thereunder; True False
- 2. I am not under any disciplinary proceeding or action nor had a license or certificate disciplined, denied, surrendered, suspended, or revoked in any jurisdiction up to the date of my application to the Board; True False
- 3. I have never been convicted of a felony; True False
- 4. I have not represented myself as an architect, professional engineer, land surveyor, landscape architect, professional geologist, professional soil scientist, or certified interior designer, without proper licensure or certification, either verbally or on any printed matter, in the State of Minnesota, nor will I do so until such time as my license or certificate has been issued by the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience and Interior Design; and True False
- 5. I have not performed or offered to perform any services reserved in statute to an individual who is properly licensed as an architect, professional engineer, land surveyor, landscape architect, professional geologist, or professional soil scientist in the State of Minnesota until my license has been issued by the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience and Interior Design. True False

I declare that everything I have stated in this document is true and correct. If signing electronically, I agree that my electronic signature shall constitute the execution of this document in exactly the same manner as if I had signed by hand.

Applicant Signature _____

Date _____

THIS SECTION FOR BOARD USE ONLY

Application Withdrawn Date

APPROVAL BY DELEGATION OF AUTHORITY	
Signature	
Date	

RECOMMEND DENIAL OF APPLICATION	
Board Member Signature	
Board Member Name	
Date	

RECOMMEND APPROVAL OF APPLICATION	
Board Member Signature	
Board Member Name	
Date	



EXPERIENCE REFERENCE FORM COMITY APPLICATION INSTRUCTIONS

NOTE: Use this form **only** if you are **not** submitting an NCARB Council Record (see [Application Instructions](#)).

Applicant Instructions:

This form serves to document in detail your work experience. **Note that experience requirements vary depending upon application method** (see [MN Rule 1800.1000 Subpart 6-7](#) and the [Architect by Comity Application Instructions](#)).

1. Complete the areas marked **APPLICANT**. Be sure to sign and date the form (see [middle of page 1](#)).
2. When completing the **APPLICANT** fields for the [Description of Work](#) (page 2), be detailed and accurate.
3. Provide separate copies of this form to each supervisor you listed on [Part E: Experience References](#) of the [Architect by Comity Application Form](#). Include only the information/hours appropriate to each supervisor. Provide the supervisor(s) with ALL pages of this form, **including this instruction page**.
4. Ask the supervisor(s) to return this form **directly to the Board office** (see address above). You may wish to provide them with a stamped and addressed envelope for this purpose.

Supervisor Instructions:

1. Complete all areas marked **SUPERVISOR**. All are **required**. Be sure to sign and date the form (see [bottom of page 1](#)).
2. For the [Description of Work](#) (page 2) **initial** next to every description you can substantiate. Leave the initial field blank for any description you **cannot** substantiate.
3. Return the form (pages 1 and 2) **directly to the Board office** (see address above).

If you have questions about this form, please call the Board office at 651-296-2388.

NOTICE OF COLLECTION OF PRIVATE DATA

In accordance with the Minnesota Government Data Practices Act (Minnesota Statutes §13.04, Subd. 2), the Board is required to inform you of your rights as they pertain to private data collected from you on this application for licensure. The data you furnish on the application will be used by the Board to assess your qualifications for licensure. The collection of your social security number by the Board is required by both federal and state laws. You are not legally required to provide this data; however, if you fail to do so, the Board may be unable to approve your application or issue your license.

Federal law (42 U.S.C. 666(a)(13)) requires each state to collect social security numbers at the time of application for a professional or occupational license in order to improve effectiveness of child support enforcement.

Additionally, pursuant to Minnesota Statutes §270C.72, Subd. 4 (2022) the Board must provide the Commissioner of the Minnesota Department of Revenue a list of all applicants, including name, address and social security number or Individual Tax Identification Number (ITIN), each calendar year for the purpose of identifying individuals owing delinquent taxes. Pursuant to Minnesota Statutes §13.41, Subd. 2 (2022), all application data, except name and designated address, are private data until licensure is granted. When licensure is granted, all data, except social security number, become public record.

The Board will not share your private data with other persons or agencies unless it is required by law.



EXPERIENCE REFERENCE FORM ARCHITECT COMITY

Please read the INSTRUCTIONS page before completing.

1: General Information and Signatures

APPLICANT: COMPLETE THIS SECTION

Applicant Name

(Legal FIRST Name)

(Legal LAST Name)

Applicant Title

(Job title at employer listed below)

Supervisor Name

Employer/Company Name

Employment Dates:

to

(MM/DD/YYYY)

(MM/DD/YYYY)

Employment Type:

Full Time

Part Time

- If part time, indicate hours per week:

Postmark Date:

(MM/DD/YYYY)

Provide a date prior to the application deadline by which you want the supervisor to return this form to the Board.

APPLICANT'S AUTHORIZATION AND RELEASE – THIS RELEASE MUST BE SIGNED BEFORE SENDING TO SUPERVISOR.

I hereby authorize the Board of AELSLAGID to make inquiries of the person listed as a reference with respect to my experience and employment. I authorize the release of information, favorable or otherwise, **directly** to the Board.

Applicant Signature

Date

SUPERVISOR: COMPLETE THIS SECTION

The Board requests your cooperation in making its evaluation of the qualifications of the applicant more thorough. All information secured from supervisors/employers is for the use of the Board. In keeping with the [Minnesota Government Data Practices Act](#), the information you provide will be private until the applicant becomes certified, at which time it will be classified as public information.

Please return this signed and completed form **to the Board** by the postmark date indicated in the box above.

1. I directly supervised the applicant's work:

Yes

No

2. The applicant provided correct employment dates and hours worked per week above:

Yes

No

If **no**, provide correct dates/hours:

I hereby certify that the applicant's qualifying architectural experience initialed by me on page 2 of this form was obtained under my direct supervision.

Supervisor Signature

Date

Printed Name

Architect license #

State where licensed

2: Description of Work/Projects/Responsibilities

Applicant Name: _____

Supervisor Name: _____

APPLICANT: Use this section to document qualifying experience as defined and in effect in Minnesota when you were initially licensed. See www.revisor.mn.gov/rules/?view=archive, select the relevant year, select the link to the left of “Chapters 1800 to 1805,” then refer to parts 1800.1000-1200. Complete all information for each assignment or engagement. The description of work must accurately reflect the character of the work, the degree of responsibility, the location of the work and the client.

REQUIRED!

SUPERVISOR: Initial next to **every description** you can substantiate in the box on the column at right.



APPLICANT: Describe your work in detail (projects, location/setting, clients, degree of responsibility, skills demonstrated).	SUPERVISOR: Initial below.



VERIFICATION OF EXAMINATION AND/OR LICENSURE (ARCHITECT)

TO BE COMPLETED BY APPLICANT

Complete **Section A** and send a signed copy of this form to a state where you have a valid license and (if different) the state that holds your exam scores. **Check with those states regarding fees or other filing requirements**, as failure to do so may delay their processing of this form. **THIS IS A TWO-PAGE FORM. SEND BOTH PAGES.**

Section A: Applicant Information/Authorization

TO: (Address of state board completing form)

Legal Name _____
(Legal FIRST Name) (Legal MIDDLE Name) (Legal LAST Name) Suffix)

Last 4 of SS # XXX-XX- Former Name _____
(if applicable)

Address _____

City _____ State _____ ZIP _____

I am applying to the Minnesota Board of AELSLAGID. I authorize the Verifying Board to provide any and all pertinent information requested.

Applicant Signature

Date

TO BE COMPLETED BY VERIFYING BOARD

Complete all relevant items in **Sections B–G** and return **both pages** to the Minnesota Board at the address above.

Section B: Registration/License Held by Applicant

Registration	Certificate/License #	Date Issued (mm/dd/yyyy)	Expires (mm/dd/yyyy)
Architect			

Section C: Basis of Licensure

(Check box next to applicable situation and provide any details requested.)

- EXAMINATION. Total hours: _____
Note: Provide detail in [Section F: Record of Examinations](#) on page 2.)
- COMITY with the following state(s): _____
- EDUCATION AND EXPERIENCE. If checked, please attach information detailing what your state's requirements were at the time this individual became licensed in your state.

Section D: Experience (IDP/AXP)

(Check all that apply and provide any details requested.)

- Completed NCARB IDP/AXP. Date completed: _____
- Completed state-specific IDP/AXP. Date completed: _____
- Completed neither NCARB IDP/AXP nor state-specific IDP/AXP.

Section E: Investigations or Complaints

Has formal disciplinary action ever been taken against the above-named individual?

If **yes**, attach a detailed explanation.

- Yes No

Continued on back page.

