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Fee Paid

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR DEPARTMENT OF CONSUMER AFFAIRS • CALIFORNIA ARCHITECTS BOARD 2420 Del Paso Road, Suite 105, Sacramento, CA 95834 P (916) 574-7220 | F (916) 575-7283 | www.cab.ca.gov



CALIFORNIA ARCHITECT RECIPROCITY APPLICATION

Fee: \$35 (nonrefundable) check or money order made payable to the California Architects Board and mail to the address above.

CAB ID

License Number

Date Paid		Issue	Issue Date		
PERSONAL INFORM	ATION				
SSN or ITIN*	NCARB Recor	NCARB Record Number		CAB ID (If Known)	
Last Name	I	First Na	First Name		
fiddle Name		Suffix	Suffix		
Address of Record					
City	State/Pro	vince		ZIP/Postal Code	
Country	<u> </u>				
Daytime Phone		Evening	Phone		
Email					
Birthdate (Month/Day/Yea	ar) Sex Mal	е	Female	Nonbinary	
Other Known Name(s)				-	

*See disclosure information on page 5.

GENERAL QUESTIONS

1.	Have you previously applied for registration in California?	Yes	No
2.	Do you have a current and valid NCARB certification?	Yes	No
3.	Have you completed the NCARB's Architectural Experience Program (AXP), which was formerly known as the Intern Development Program (IDP)?	Yes	No
4.	Have you completed the CACB's Canadian Internship Architect Program (IAP)?	Yes	No
5.	Would you like your information (name and address) shared with other individuals or organizations offering to provide education information regarding the examination?	Yes	No

MILITARY SERVICE QUESTIONS

BPC section 114.5 requires all boards, bureaus, committees, and commissions within the Department of Consumer Affairs to ask whether an individual is serving in, or has previously served in, the military. Answering the following questions are optional.

- 1. Have you ever served or are you currently serving in the U.S. military? If you Yes No answer **YES**, you may qualify for expedited application processing by providing a copy of your DD-214 (Certificate of Release or Discharge from Active Duty).
- 2. Are you a spouse / domestic partner of an active duty military member of the Yes No U.S. Armed Forces who is assigned to a duty station in California under official active duty military orders?

Individuals married to, or in a domestic partnership (or other legal union) with, an active duty member of the Armed Forces of the United States who is assigned to a duty station in California under official "active duty" military orders will receive expedited license processing.

Individuals eligible for this option **must attach to this application** proof of marriage or domestic partnership (or other legal union) and hold a current architect license in another state, district, or territory of the U.S.

REFUGEE STATUS QUESTION

Business and Professions Code section 135.4 provides that the Board must expedite, and may assist, the initial licensure process for certain applicants described below.

Do any of the following statements apply to you:

Yes No

- You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code;
- You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code; or,

 You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

If you selected **YES**, you must attach evidence of your status as a refugee, asylee, or special immigrant visa holder. Failure to do so may result in application review delays.

Acceptable Documentation includes the following:

- Form I-94, Arrival/Departure Record, with an admission class code such as "RE" (Refugee) or "AY" (Asylee) or other information designating the person a refugee or asylee.
- Special immigrant visa that includes the classification of "SI" or "SQ."
- Permanent Resident Card (Form I-551), commonly known as a "Green Card," with a category
 designation indicating that the person was admitted as a refugee or asylee.
- An order from a court of competent jurisdiction or other documentary evidence that provides reasonable assurance the applicant qualifies for expedited licensure.

DISCIPLINARY AND CONVICTION QUESTIONS

- 1. Have you ever had a registration denied, suspended, revoked, or otherwise Yes No been disciplined by a public agency in any state or country? If **YES**, explain the details on a separate sheet of paper and attach.
- 2. Have you ever been convicted of, or pled guilty or nolo contendere to ANY Yes No criminal or civil offense (including every citation, infraction, misdemeanor, and/or felony, including traffic violations) in the United States, its territories, or a foreign country?

You may omit: any traffic infraction for which the fine imposed was \$1,000 or less and any incident that was sealed or disposed of under California Welfare and Institutions Code section 781 and California Penal Code (PEN) sections 1000.3, 1000.5, or 1203.45. Convictions that were adjudicated in the juvenile court or convictions under California Health and Safety Code (HSC) sections 11357(b), (c), (d), (e), or section 11360(b) which are two years or older should NOT be reported.

Convictions that were later dismissed pursuant to California PEN sections 1203.4, 1203.4a, or 1203.41 or equivalent non-California law MUST be disclosed. All other convictions MUST be disclosed. If you have obtained a dismissal of your conviction(s) pursuant to California PEN sections 1203.4, 1203.4a, or 1203.41, please submit a certified copy of the court order dismissing the conviction(s) with your application.

If you answer **YES**, please explain details on a separate sheet of paper and attach. Indicate the date and place of arrest, name of court, court case number, code section violated, brief explanation of the offense, and the sentence imposed; or if applicable, indicate the date and nature of the disciplinary action, name and location of public agency, and the fine or sentence imposed. If convicted under another name, please indicate other name(s).

- 3. Exclusive of juvenile court adjudications and criminal charges dismissed under Yes No California PEN section 1000.3 or equivalent non-California laws, or convictions two years or older under California HSC sections 11357(b), (c), (d), (e), or section 11360(b), have you had a conviction that was set aside or later expunged from the records of the court?
- 4. Is any criminal action pending against you, or are you currently awaiting Yes No judgment and sentencing following entry of a plea or jury verdict?

LICENSURE INFORMATION

List the names of all jurisdictions (e.g., states, foreign countries, provinces, territories) from which you have received a license to practice architecture. Please list your primary jurisdiction on the first line. If you need any additional space, please use a separate sheet and attach.

Jurisdiction	License Number	Issue Date (MM/DD/YYYY)	Expiration Date (MM/DD/YYYY)

EDUCATION

Have you received a high school diploma or GED?

Yes No

University or College – Name and Location:	Course of Study	Degree, Diploma or Certificate	Date Conferred (MM/DD/YYYY)

EXPERIENCE

The Board requires training (work) experience to be documented on the <u>Employment Verification</u> <u>Form</u> (EVF). All EVFs must contain the original signature of the employer. Copies, rubber stamps, or other reproductions of the signature will not be accepted. In addition, forms containing strikeouts or corrections will not be accepted.

REASONABLE ACCOMMODATIONS

The Board recognizes its responsibilities under Title II of the Americans with Disabilities Act to provide reasonable, appropriate, and effective testing accommodations, including auxiliary aids to qualified examination candidates with disabilities. However, the Board will not fundamentally alter the measurement of the skills or knowledge the examination is intended to test.

A disability is defined as a physical or mental impairment that substantially limits one or more of the major life activities of an individual (such as seeing, hearing, learning, reading, concentrating, or thinking) or a major bodily function (such as the neurological, endocrine, or digestive system). Mental impairment includes any mental or psychological disorder, such as organic brain syndrome, emotional or mental illness, and specific learning disabilities.

For more information and the *Reasonable Accommodation Request Form* please visit <u>Reasonable</u> Testing Accommodations on our website.

SOCIAL SECURITY NUMBER DISCLOSURE

Disclosure of your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) is mandatory. Business and Professions Code (BPC) sections 30 and 5550.5 and Public Law 94–455 (42 USCA 405(c)(2)(C)) authorize collection of your SSN or ITIN. Your SSN or ITIN will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with section 17520 of the Family Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN or ITIN, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.

FINGERPRINTING REQUIREMENT

Starting January 1, 2021, all new applicants for licensure by the Board must submit a full set of fingerprints for the purpose of conducting a federal and state criminal history record check. Fingerprints are compared to the records of the California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI) to determine if the applicant has a criminal history.

For more information see our Fingerprinting FAQs.

REVIEW ALL INFORMATION PRIOR TO SIGNING THIS APPLICATION.		
Original signature required.		
I declare under penalty of perjury under the laws of the State of California that all my representations on this California Architect Reciprocity Application (including attachments) are true, correct, and contain no material omissions of fact to the best of my knowledge and belief.		
Signature	Date	