



## APPLICATION FOR LICENSURE OF AN ARCHITECT

- This application applies to those licensed in another U.S. state or territory, or applying for reinstatement in Nebraska. All others, please contact the Board office before submitting.
- **Do not substitute a resume** or other synopsis for any part of this application form.
- **NCARB record holders:** If you have requested NCARB to submit your record to the Nebraska Board, complete Section I and then proceed to Section IV. You do not need to complete Sections II and III or submit a verification form.
- **Make checks payable to** the Nebraska Board of Engineers and Architects or NBEA.
- **Filing Fees** are non-refundable once deposited by the Nebraska Board.
- **In the event that your check is returned unpaid** for insufficient or uncollected funds, we may re-present your check electronically. In the ordinary course of business, your check will not be provided to you with your statement.

### SECTION I: GENERAL INFORMATION

1. \_\_\_\_\_  
*Full Legal Name (Including full middle name)*

2. \_\_\_\_\_  
*Social Security Number (last four digits)*

3. Previously registered in Nebraska? No  Yes  \_\_\_\_\_  
*License Number*

*If you are requesting reinstatement, you must complete a Reinstatement Affidavit. All applicants with inactive licenses must also submit 24 hours of continuing education documentation for the two years prior to application date. At least 16 CE hours must address the safeguarding of life, health, and property (a CE log is available on our website). See Chapter 9 of the Board's Rules for more information.*

4. **Do you have an NCARB certificate?** No  Yes  NCARB Certificate Number: \_\_\_\_\_

5. **Mailing address:**

\_\_\_\_\_  
*Firm Name (if applicable)*

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City, State, Zip Code*

\_\_\_\_\_  
*Email Address*

\_\_\_\_\_  
*Telephone* ext \_\_\_\_\_

\_\_\_\_\_  
*Alternate Telephone* ext \_\_\_\_\_

\_\_\_\_\_  
*Fax*



**SECTION II: EDUCATION**

- Enter the name and location of the college or university, date of graduation, and type of degree received.
- A copy of your official transcript or other documents issued directly by the granting institution, or its authorized agent verifying your graduation from an NAAB-accredited architecture program is **required to be sent directly to the Board**. Electronic transcripts may be sent to the above email.
- Applicants with non-NAAB-accredited degrees must have their degrees evaluated by EESA. Please visit [www.ncarb.org](http://www.ncarb.org) for more information. The evaluation is to be submitted directly to the Nebraska Board.
- NCARB record holders do not need to complete this section or submit proof of graduation.

Name of Institution, Location (City, State, Country)	Date Graduated		Degree Received (BS, MS, etc.)	Major
	Mo.	Yr.		

**SECTION III: LICENSURE INFORMATION**

- You must have your exam and current state of licensure verification(s) forwarded directly to the Nebraska Board. Use the Verification of Licensure and Examination of an Architect attached to the end of this application.
- Some jurisdictions may require a fee for this service and turnaround times may vary. You will need to contact the verifying jurisdiction to confirm whether a fee is required and instructions for submitting the request.

**1. Architect (ARE) Exam**

State: \_\_\_\_\_ Date Final Exam Passed: \_\_\_\_\_

**2. First License**

State: \_\_\_\_\_ License #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**3. Current License (If different from Question 2)**

State: \_\_\_\_\_ License #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**SECTION IV: REFERENCES**

- List the contact information of three people unrelated to you whom you reported to or with whom you have been professionally associated.
- No current member of the Nebraska Board will be accepted as a reference.
- All references must complete an "Architect Reference" form and submit it directly to the Nebraska Board.

1. \_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

\_\_\_\_\_  
License number and State, if applicable

3. \_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

\_\_\_\_\_  
License number and State, if applicable

2. \_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

\_\_\_\_\_  
License number and State, if applicable



**SECTION V: PROFESSIONAL EXPERIENCE**

If you are submitting a NCARB Certificate, provide only your current employer. All others need to document a minimum of 15 years of licensed experience. Attach additional copies of this section if needed.

Employment Dates Month/Day/Year	Title of position held, name and address of employer and a brief summary of the architectural work performed. Make statement brief and concise.	Name, telephone number, address, and e-mail of someone familiar with each work period, preferably the person to whom applicant reported.
From 10/1/2010	<i>Architect, Smith White &amp; Associates</i> 1620 Midtown Place Omaha, NE 68105	<i>John Doe</i> 1620 Midtown Place Omaha, NE 68105 402-555-3746 jdoe@smithwhite.org
To 7/1/2015	<i>Responsible for daily operations of design concept &amp; development and construction administration for firm that specializes in architecture, master planning and urban design for a multitude of project types. Project types include retail, institutional, and mixed-use developments.</i>	
From		
To		
From		
To		
From		
To		
From		
To		



**SECTION VI: AFFIDAVIT**

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:

- I am a citizen of the United States, **OR**
- I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are \_\_\_\_\_, and I have enclosed a copy of my USCIS documentation.

**Note:** Provide an explanation and official documentation for each “YES” answer below.  
 Licensure approval or renewal will remain pending until after review.

**Professional**

- 1. Have you ever been denied a license to practice engineering or architecture in this or any other jurisdiction?  YES  NO
- 2. Has a complaint ever been filed or has formal disciplinary action ever been taken against you by a regulatory body for professional engineering or architecture in this or any other jurisdiction?  YES  NO
- 3. Have you ever voluntarily surrendered your professional engineer or architect license or entered into a negotiated settlement in order to avoid disciplinary action by a professional regulatory body in this or any other jurisdiction?  YES  NO

**Criminal**

- 4. During the past 10 years, have you been convicted of a crime, other than a minor traffic violation, in this or any other jurisdiction?  YES  NO
- 5. During the past 10 years, have you entered into a pretrial diversion program or similar pretrial procedure to avoid prosecution for a crime, other than a minor traffic violation, in this or any other jurisdiction?  YES  NO
- 6. Are there now any criminal charges, other than a minor traffic violation, pending against you in this or in any other jurisdiction?  YES  NO

**Civil**

- 7. During the past 10 years, has a judgment been entered against you in a civil proceeding in this or any other jurisdiction involving fraud, misrepresentation, or professional malpractice?  YES  NO
- 8. Is there any action or proceeding presently pending against you in any court or other tribunal in this or any other jurisdiction alleging that you committed fraud, misrepresentation, or professional malpractice?  YES  NO

*I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.*

*I will not represent myself as an architect or offer to perform architectural services in the State of Nebraska until this application is approved and an architect’s license has been granted by the Nebraska Board of Engineers and Architects.*

*Unless my firm holds a current Certificate of Authorization it is not authorized to offer or contract to perform architectural services in Nebraska.*

*I have read the Nebraska Engineers and Architects Regulation Act.*

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

**A short law examination covering the Engineers and Architects Regulation Act must be passed before licensure. The examination will be sent to you upon receipt of the completed application.**



## CHARACTER REFERENCE

*Applicant completes Section I. Section II is to be completed by your reference. If additional space is needed, please use the back of this form or a separate sheet of paper. All references must return this form directly to the Board of Engineers and Architects at the address listed above, emailed or faxed.*

### SECTION I: TO BE COMPLETED BY APPLICANT

1. \_\_\_\_\_  
*Name (First, M.I., Last)* *Date*

2. \_\_\_\_\_  
*Phone Number* *Email*

3. Application for:      Engineer Intern      Architect License

4. Name of Reference: \_\_\_\_\_

5. Relationship to reference: \_\_\_\_\_

### SECTION II: TO BE COMPLETED BY REFERENCE

1. Is the information in Section I correct as stated?    Yes    No

If No, please explain: \_\_\_\_\_

2. How long have you known the applicant? \_\_\_\_\_

3. Explain how the applicant demonstrates good reputation and good ethical character: \_\_\_\_\_

\_\_\_\_\_

Reference Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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\_\_\_\_\_

Reference Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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\_\_\_\_\_

Reference Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**VERIFICATION OF LICENSURE AND EXAMINATION OF AN ARCHITECT**

- Applicants should complete only Section I of this form.
- Forward this form to the appropriate state registration board to be completed and returned to the Nebraska Board.
- Contact your state board for information about any fees they may require for processing verifications.

FROM (STATE BOARD NAME):	DATE:
ADDRESS:	FILE NO.:

**SECTION I: APPLICANT INFORMATION**

NAME	DATE OF BIRTH:	LAST 4 DIGITS OF SSN:
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ADDRESS (STREET, CITY, STATE, ZIP)

**SECTION II: VERIFICATION OF LICENSURE OR EXAMINATION**

	Certificate or License #	Date Issued	Valid Until
1. THE ABOVE-NAMED PERSON IS OR WAS REGISTERED AS AN ARCHITECT:			

**2. EDUCATION AND EXPERIENCE**

A. COLLEGE/UNIVERSITY:	DEGREE:	MONTH/YEAR GRADUATED:
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B. INTERN DEVELOPMENT PROGRAM REQUIREMENT COMPLETED?: <input type="checkbox"/> Yes <input type="checkbox"/> No	MONTH/YEAR COMPLETED:
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C. OTHER:

**3. DENIALS, INVESTIGATIONS, AND/OR COMPLAINTS:**

A. Has the above-named individual ever been denied registration in your state? (if yes, please give details on reverse side.)  Yes  No

B. Has a complaint been filed or has formal disciplinary action been taken against the above-named individual? (If Yes, please give details in REMARKS or on reverse)  Yes  No

**4. REMARKS:**

**5. VERIFIED BY:**

BY:	BOARD SEAL
TITLE:	DATE:



**REPORT OF WRITTEN EXAMINATION**

EXAMINATION SYLLABUS (1954-1975)	Hours	Grade Minimum	Date Passed
A. Education & Experience			
B. Personal Audience			
C. History & Theory of Architecture	3		
D. Site Planning	5		
E. Architectural Design	12		
F. Building Construction	3		
G. Structural Design	5		
H. Professional Administration	3		
I. Building Equipment	5		

EQUIVALENCY EXAMINATION (June 1973 – June 1976)	Hours	Grade	Date Passed
I. Architectural Theory	2		
II. Construction Theory & Practice	8		
III. Architectural Design/Site Planning	10		

QUALIFYING TEST (June 1977 – June 1982)	Hours	Grade	Date Passed
A. Architectural History	2		
B. Structural Technology	3		
C. Materials & Methods of Construction	2		
D. Environmental Control Systems	2		
E.1 Principles of Site Planning & Arch. Design (1977-78, multiple choice)	1		
E.2 Principles of Site Planning & Arch. Design (1977-78, design problems)	11		

PROFESSIONAL EXAMINATION – SECTION A (June 1979 – June 1982)	Hours	Grade	Date Passed
Design/Site Test	12		

PROFESSIONAL EXAMINATION (December 1973 – December 1978) SECTION B (1979 – 1982)	Hours	Grade	Date Passed
Part I Environmental Analysis			
Part II Architectural Planning			
Part III Design and Technology			
Part IV Construction			

ARCHITECT REGISTRATION EXAMINATION (ARE)											
(1983-1987)	Grade	Date Passed	(1988-1996)	Grade	Date Passed	(1997-2009)	Grade	Date Passed	ARE 4.0 (2008-)	Grade	Date Passed
A - Pre-Design			A - Pre-Design			PD			Program Planning and Practice		
B - Site Design			B - Site Design/ Written			SP					
			B - Site Design/ Graphic						Site Planning & Design		
C - Building Design			C - Building Design			BP			Bldg Design & Construction Systems		
D - General Structure						BT					
F - Long Span Structure			D/F - General & Long Span			GS			Schematic Design		
E - Lateral Forces			E - Lateral Forces			LF			Structural Systems		
G - Mech/Electrical			G - Mech/Electrical			ME			Building Systems		
H - Materials/Methods			H - Materials Methods			MM			Construction Documents & Services		
I - Construction Documents			I - Construction Documents			CD					