Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8506

X



Trans

www.dpor.virginia.gov

Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects INTERIOR DESIGNER CERTIFICATE - UNIVERSAL LICENSE RECOGNITION APPLICATION Fee \$45.00

> DPOR may require an individual seeking a professional or occupational licensure or government certification pursuant to the Code of Virginia, §54.1-205 to pass an examination specific to relevant state laws.

A check or money order payable to the <u>TREASURER OF VIRGINIA</u>, or a completed <u>credit card insert</u> must be mailed with your application package.

APPLICATION FEES ARE NOT REFUNDABLE.

Select <u>one</u> license type you are requesting:

License Type

	0412 - Interior De	esigner Comity		1021		
	0412 - Unlicense	d/Uncertified Interior Desig	ner - ULR by Exam	1020		
1.	Have you <u>ever</u> held a license and/or ce Regulation? No Yes	rtificate issued by the	Virginia Departmo	ent of Prof	essional and	d Occupational
2.	Full Legal Name (As it appears on your go	overnment issued ID or o	ther legal document	ation.)		
	Last (required) First	t (required)	Middle			Generation
3.	Provide at least one of the following identification number and/or Virginia DMV Control Number Enter the same identification number as used on state law requires every applicant for a license, on by the Commonwealth to provide a social security.	examination, previous applica ertificate, registration or other	authorization to engage i	n a business, t	rade, profession	or occupation issued
4.	Date of Birth					
5.	Maiden or Former Name(s)					
6.	Mailing Address (PO Box accepted) The mailing address will be printed on the license.	City			State	Zip Code
7.	Street Address (PO Box <u>not</u> accepted) PHYSICAL ADDRESS REQUIRED		et Address is the <u>same</u> as	the Mailing Ac		'
		City			State	Zip Code
8.	Contact Numbers Primary Telep	hone	Alternate Telephone			
9.	Email Address					
	Email addres	s is considered a public re	cord and will be disclos	sed upon requ	uest from a thir	d party.

TRANS CODE

ENTITY#

0412

OFFICE

ONLY

DATE

FEE

ISSUE DATE

FILE #/LICENSE #

App	licants who ho	id a <u>current</u> license/certificate	•			
A.	Do you hold a	a current (non-Virginia) licens If no, skip to question #11.	e or certificate issued by	a regulatory boa	rd or government en	tity?
	Yes	If yes, have you held this lice	nse/certificate for at leas	st 3 years?		
		certification appl	ot qualify for the Universication.	sal license. You	may apply using the	Board's
		Yes				
B.	Did your curr	ent state or your state of origin	al licensure/certification	require you to pa	ss an examination?	
	No	If no, you do not qualify for application.	the Universal license.	You may apply u	sing the Board's ce	rtification
	Yes	If yes, did that state req	•	any education,	training and/or ex	perience
		requirements to obtain this lie No If no, you do r	not qualify for the Unive	rsal license. You	may apply using the	Board's
		license/recipro	ocity application.			
C.	Complete the	e following table and include all	current and expired lid	censes and/or cer	tification issued from	anv
	•	y, possession, or jurisdiction of				,
	Complete the	Verification of Interior Design	ner Examination and Ce	ertification Form t	o provide evidence o	of having
	passed the N	ICIDQ examination.				
		State/Jurisdiction	License, Certification or Registration Number	Did you pass an examination?	Expiration Date	
				Yes		
				Yes		
				Yes		
				Yes		
				Yes		
				Yes		
D.	Do you have application? No Yes	e any unresolved complaints of	· ·	,	,	itted this
to qu	estion #12.					

Skip

10.

11.	For	app	licar	ıts w	ho <mark>do not hol</mark>	d a c	current license or certificate.			
	A.		o you			or j	urisdiction of the United Sta	tes (other than '	√irginia) that do	es <u>not regulate</u> your
			No				not qualify for the Universal	I license. You m	nay apply using	the Board's license
			Yes		• •		worked in this profession for	a least three yea	rs?	
					No	l If n	no, you do not qualify for a Ui	niversal License	at this time. You	may apply using the
					.,	Bo	ard's license application.			
	_				Yes _					10110
	B.	Ha	•	ou e	•		mination for this profession in	•	•	
			No		•	-	ℓ be required to take the Viblicant will be notified by the B	•	•	•
			Yes				the <u>Verification of Interior De</u> ring passed the NCIDQ exam		ion and Certifica	tion Form to provide
	C.	Li	st all	the	state or jurisdi	ction	of the United States where yo	ou have practiced	I this profession:	
									es of	
				St	ate/Jurisdiction		Profession/Occupation	Employ		
								Start (MM/YY)	Finished (MM/YY)	
		Ī								
		İ								
		L				*(L	oyment.		
	_	Λ.						214 1 1	determination Con-	l # 10
	D.	ΙA		<u>erie</u>			<u>rm</u> must be complete and sub	•		
			No	Ш	<u> </u>	•	s, provide a completed Interio	•		
12.		-	ou e	er b	een subject to	a <u>di</u> s	sciplinary action taken by ar	ny (including Virg	inia) local, state	or national regulatory
	bod	y r lo								
		es.	Н	lf	ves, complete	the [Disciplinary Action Reporting I	Form.		
13.	A.	Ш	31/0.1		•		d or found guilty, regardless of		adjudication in	any jurisdiction of the
10.	Λ.		•		tes of any <u>felo</u>		a or round guilty, regardless t	or the manner of	aujuulcation, in e	arry jurisdiction of the
			No]					
			Yes		If yes, com	plete	the Criminal Conviction Repo	orting Form.		
	B.		•				d or found guilty, regardless of juana misdemeanor.	of the manner of	adjudication, in a	any jurisdiction of the
		J.	No]		J			
			Yes		If yes, com	plete	the Criminal Conviction Repo	orting Form.		

- 14. By signing this application, I certify the following statements:
 - I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
 - I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
 - I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
 - I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
 - I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 4, of the Code of Virginia and the Virginia Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects Regulations.

Signature Date
