



The State of North Carolina

The North Carolina Board of Architecture
 127 W. Hargett Street Suite 304
 Raleigh, NC 27601

Phone: 919.733.9544 Fax: 919.733.1272
 Email: ncba@ncbarch.org url: <http://www.ncbarch.org>

Application to take the Architectural Registration Exam (ARE) Early Eligibility Option Application Fee: \$50.00

Information and Instructions to all Individuals Applying for Architect Registration by Exam

- Prior to completing this application you must read the Board rules and laws governing the practice of architecture in North Carolina, they are found at www.ncbarch.org in the rules and laws section.
- Fill out the application and submit it along with the fee to the address above.
- If you have sealed original transcripts from your university, you may attach them, otherwise you must have your university forward your official transcripts directly to the Board office, showing completion of the NAAB degree.
- Attach a copy of your NCARB verified employment report (E-evr) as found in your on-line file in the "My NCARB Record" section at www.ncarb.org, indicating that at least 2000 training hours have been completed and verified. An incomplete IDP record will NOT be accepted as verification.
- You are required to notify the Board of all contact information changes. ***With the exception of ARE Scores, all correspondence from NCBA will be via email.***
- Score report information will **not** be given over the phone.

Name (as preferred), Please print legibly: Last _____ First _____ Middle (initial or name) _____		
Social Security Number: _____ Date of Application: _____		
<i>Home Address Information</i> Street _____ Apartment Number _____ City _____ State _____ Zip _____	<i>Firm/Business Contact Information</i> Firm Name _____ Street _____ Suite/Rm. _____ City _____ State _____ Zip _____	
<i>As indicated above, with the exception of ARE Score reports, all correspondence from NCBA will be via email. Please print your email address clearly.</i>	Email Address: _____ Home Phone Number: _____ Firm/Business Phone Number: _____ Fax Number: _____ Citizenship (circle one): Birth _____ Naturalized _____ Other _____	Date of Birth: _____ Place of Birth: _____
NCARB IDP File Number: _____		

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Name:

Educational Background

Preparatory Schools/ High Schools	City, State and Dates of Attendance	Grades Completed

Colleges, Universities, Technical Schools	City, State and Dates of Attendance	Grades Completed

Travel	Continuing Education	Research/Publications

Professional Organizations/Public Service

Name of Organization and Address

Public and Community Service

Architect References

Name three architects who are personally acquainted with your professional abilities.

Name and State of Registration	Address	Telephone Number

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Name:

Transcripts, check one:

_____ SEALED original transcripts are attached.

_____ will be sent by my university.

Affidavit and Notarization

_____ (initials) I hereby certify that I have read the laws and rules governing the practice of architecture in North Carolina and that I will not willfully violate the statute or any rules or standard of conduct published by the North Carolina Board of Architecture.

_____ (initials) I further certify that I have never been convicted of any felony and have never been the subject of disciplinary action in college or by another state architecture board except as explained on the reverse side of this form.

_____ (initials) I hereby apply for Registration and License to Practice Architecture by Computer Examination. I understand that providing false information on an application for registration may subject me to discipline by the Board, including denial of registration.

_____ (initials) I have completed a professional degree from an NAAB accredited university and I have completed at least 2000 IDP training hours.

_____ (initials) I understand that beginning the ARE prior to completion of the Intern Development Program may affect opportunities for reciprocal registration in other states.

_____ (initials) I understand that prior to being licensed in the State of North Carolina:

- (a) I must pass all parts of the ARE within five years of passing the first sections. Each section is only valid for five years.
- (b) I must complete 5600 IDP training hours and submit my complete NCARB IDP file to the Board before I can be registered as an architect.
- (c) I must comply with NCGS 83A-7 (a)(1)a. by having at least three years practical training under a licensed architect.

The undersigned, being duly sworn, upon this oath deposes and says that he/she is the person making the forgoing statements and that they are in good faith and are true in every respect.

Signature of Applicant

Legibly Printed Name

Date

State of: _____

County of: _____

I, _____, A NOTARY PUBLIC in and for the said County, in the state aforesaid, DO HEREBY CERTIFY that

_____ Is personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that he/she signed, sealed, and delivered the said instrument as his free and voluntary act, for the uses and purposes therein set forth.

GIVEN UNDER MY HAND AND NOTARIAL SEAL
THIS DAY OF , 20

NOTARY PUBLIC

MY COMMISSION EXPIRES:

NOTARIAL SEAL

