

Michigan Department of Licensing and Regulatory Affairs
 Corporations, Securities & Commercial Licensing Bureau
 Licensing Division
 LANDSCAPE ARCHITECTS
 P.O. Box 30018, Lansing, MI 48909
 517-241-9288
 www.michigan.gov/landscapearchitects

REQUEST FOR VERIFICATION OF EXAMINATIONS, OR LICENSURE FOR LANDSCAPE ARCHITECTS

AUTHORITY: P.A. 299 OF 1980.
 PENALTY: FAILURE TO PROVIDE THIS INFORMATION MAY RESULT IN DENIAL OF THE APPLICATION
 AND/OR DISCIPLINARY ACTION.

MI Applicants	Complete Section I of this form and forward it to the state board or regulatory agency verifying your registration or licensure and exams. If you took exams in more than one state, you should request verification from each state maintaining exam records for you. You may photocopy this form if necessary. The verifying agency will send this completed form directly to our office. It may be helpful if you would include an envelope addressed to our office using the address listed at the top of this form.
Verifying Agency:	Complete Section II for exams, licensure or registration held in your jurisdiction by the individual referenced in Section I. Return the form directly to the Licensing Division using the address listed at the top of this form.

SECTION I

Name	Type of License/Registration	License/Registration Number
Address	City, State ZIP Code	Daytime Telephone Number

I hereby request written verification herein and authorize the release of related examination records to the State of Michigan.

 Sign _____
 Date

SECTION II

License/Registration held in your State	License/Registration Number	Date Issued
Expiration Date	Current Status <input type="checkbox"/> Active <input type="checkbox"/> Lapsed <input type="checkbox"/> Other:	

Is there currently or has there ever been any disciplinary action against the above referenced individual?
 (Attach additional material if necessary) Yes No

Method of Licensure	Landscape Architects	Grade	Date
Examination (post grades on other side)	LARE Division 1 or UNE Section A		
Reciprocity (list state or jurisdiction here)	LARE Division 2 or UNE Section B		
Waiver or Grandfather clause	LARE Division 3 or UNE Section C		
Other:	LARE Division 4 or UNE Section D		
Type of Examination	LARE Division 5		
National (List name of exam here)	LARE Division 6		
State Constructed Exam	LARE Division 7		

Certification By State Board I CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT ACCORDING TO THE OFFICIAL RECORDS OF THIS STATE. State Signature Title Date Telephone Number	Seal Imprint
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