



RECIPROCITY APPLICATION CERTIFICATION OF EXPERIENCE

(CLARB Council Record may be transmitted by CLARB in lieu of Sections III, IV and V)

Section III - Completed by Reciprocity Applicant

| All Reciprocity applicants a Architects Technical Comm | • | plete this certific | ation along with | the Application and s | submit it to the Landscape |
|--|------------------------|---------------------|------------------|-----------------------|----------------------------|
| NAME: | | | | | |
| (La | ıst) | (First) | | (Middle) | |
| KNOWN BY ANY OTHER NAM | ΛE: | | | | |
| | | (Include M | aiden Name) | | |
| ADDRESS: | umber and Street) | | | (0) | (Ti. O. I.) |
| (Nu | umber and Street) | | (City) | (State) | (Zip Code) |
| WORK PHONE: () | HOME PHONE: () | | | | |
| This will certify that the abov FromTo Month/Year | | | purs/Week | | |
| | Month/Year | | | | |
| Supervisor's License Type | License# | State Issued | Country | Issue Date | Expiration Date |
| | | | | | |
| Business Address | City | State | Zip Code | Country | Business Phone Number |
| | • | | • | | Business Phone Number |
| Business Address Check the box(s) that identi Landscape Architecture | ifies the type(s) of v | | by the candidate | | |
| Check the box(s) that ident | ifies the type(s) of v | vork performed b | by the candidate | :: Landscape (| Contracting |

State

Supervisor Signature

Country

City or County

Date

Supervisor Name (please print)

Section V – Completed by Reciprocity Applicant

| This will certify that I worked under my own license for the following time period: | | | | | | | | | |
|--|-----------------------|---------------------------|---------------------|-------------------------|-----------------------|--|--|--|--|
| FromTo Month/Year | Month/Year | Full-Time | | | | | | | |
| Candidate's License Type | License# | State Issued | Country | Issue Date | Expiration Date | | | | |
| Business Address Check the box(s) that identifies | City the type(s) of w | State ork you performe | Zip Code d: | Country | Business Phone Number | | | | |
| Landscape Architecture Architectu | | re Civil Engineering | | ☐ Landscape Contracting | | | | | |
| I certify under penalty of perjury under the laws of the State of California that the information contained in this certification is true and correct. | | | | | | | | | |
| Executed onDate | at | City or County | | State | Country | | | | |
| Candidate Name (please print) | | | Candidate Signature | | | | | | |

DISCLOSURES

Collection and Use of Personal Information: The LATC, under the auspices of the California Architects Board and the Department of Consumer Affairs, collects the personal information requested on this form to determine qualifications for a landscape architect license. California Business and Professions Code sections 27, 141, 480, 5650, 5651, 5652, and 5654 authorize the collection of this information.

Mandatory Submission: Submission of the requested information is mandatory. The LATC cannot consider your application for examination unless you provide all of the requested information.

Access to Your Information: You may review the records maintained by the LATC that contain your personal information, as permitted by the Information Practices Act (California Civil Code section 1798 et seq.). See below for contact information.

Possible Disclosure of Personal Information: The LATC makes every effort to protect the personal information you provide. The information you provide may also be disclosed in the following circumstances, according to the provisions of California Business and Professions Code section 30, California Civil Code section 1798.24, and CCR, title 16, division 26, article 1, section 2608:

- In response to a California Public Records Act (California Government Code section 6250 et seq.) request, as allowed by the Information Practices Act (California Civil Code section 1798 et seq.);
- To another government agency as required by state or federal law; or
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information The Executive Officer of the Board is responsible for maintaining the information in this application, and may be contacted at 2420 Del Paso Road, Suite 105, Sacramento, CA 95834, (916) 574-7220 regarding questions about this notice or access to records. For questions about this application you may contact the Program Manager of the Landscape Architects Technical Committee2420 Del Paso Road, Suite 105, Sacramento, CA 95834, (916) 575-7230 or email latc@dca.ca.gov.