

Architect Application Instructions

Registration as an architect in Washington State is based on qualifications and experience. Qualifications are verified by the successful completion of an exam. Experience is verified by documentation of education and practical work experience. The board has adopted the national Architect Registration Examination (ARE) developed by the National Council of Architectural Registration boards (NCARB) as the state exam.

You will register one of three ways:

1. By direct registration if you have an accredited degree
2. By examination if you do not have an accredited degree
3. By reciprocity if you are licensed in another state

Mail the application, application fee, and initial licensing fee to:

Washington State Board for Architects
Department of Licensing
PO Box 9048
Olympia, WA 98507-9048

Mail all other supporting documents to:

Washington State Board for Architects
Department of Licensing
PO Box 9045
Olympia, WA 98507-9045

Exam requirements

1. Until June 30, 2012, you must meet the following requirements:
 - Be at least 18 years old.
 - Have an accredited architectural degree and have completed the Intern Development program (IDP).

or

 - Have completed IDP and have 8 years' practical architectural work experience, with at least 4 years' experience under the direct supervision of an architect.
2. Starting July 1, 2012, candidates who haven't started IDP or haven't had any activity for over 5 years must meet the following requirements:
 - Be at least 18 years old.
 - Have an accredited architectural degree and have completed at least 3 years' IDP.

or

 - Have a high school diploma or equivalent and at least 9 years of practical architectural work experience, including completion of IDP. Before enrolling in IDP, you must have had at least 6 years of work experience, with at least 3 years' experience under the direct supervision of an architect.

Written summary of Washington laws and rules

A summary must be written in sufficient detail to show a thorough understanding of the laws and rules (approximately 20–30 pages total) and should:

- Not be a verbatim copy of the law.
- Be typed and double-spaced, and include:
 - All sections and subsections of [RCW 18.08](#); [RCW 18.235](#); [WAC 308-12](#).
 - The title of each subsection of the laws and rules.
 - A signed, dated [Law Summary Affidavit](#).

Note: You don't need to summarize redacted sections or subsections of the laws and rules. Footnotes are not required.

If you have an accredited bachelor's or master's degree in architecture from a university recognized by the National Architectural Accrediting Board (NAAB)

1. Apply by direct registration with NCARB for your:
 - Intern Development Program (IDP) training.
 - Completion of the Architect Registration Examination (ARE).
2. For more information, see "Certification and Reciprocity" at the NCARB website.
3. After you've completed your licensing requirements through NCARB, send us all of the following:
 - a. A completed Architect Registration Initial Application.
 - b. A check or money order, payable to the Department of Licensing, for the \$125 fee (\$50 non-refundable application fee plus \$75 initial 2-year registration fee).
 - c. A written summary of Washington laws and rules. See above.

If you have a non-accredited bachelor's or master's degree in architecture from a university not recognized by the National Architectural Accrediting Board (NAAB) or are applying with work experience only:

1. Work directly with NCARB during Intern Development Program (IDP) training.
2. After you've completed IDP, send us all of the following:
 - a. A completed Architect Registration Initial Application.
 - b. A check or money order, payable to the Department of Licensing, for the \$50 application fee (non-refundable).
 - c. Any transcripts that weren't included in your IDP record sent directly from the issuing institution.
 - d. Employment and experience summary documenting work experience completed outside of IDP (page 4 of this form).
3. When your application is complete, we'll register you to take the Architect Registration Exams (ARE).
4. When you've passed the entire ARE and, if necessary, the oral exam, submit:
 - a. A check or money order, payable to the Department of Licensing, for the \$75 initial 2-year registration fee.
 - b. A written summary of Washington laws and rules. See page 1.

How to get your architect's license by reciprocity

To qualify for reciprocity, you must:

1. Have a current architect license in good standing in another state, province, or recognized jurisdiction that is a member of the National Council of Architectural Registration Boards (NCARB). If you did not complete IDP, you must have been licensed in another recognized jurisdiction for at least two years.
2. Demonstrate that your qualifications and experience are equivalent to those required under RCW 18.08.350.
3. Provide documentation that you've met the NCARB seismic exam requirements. If you can't prove completion of seismic exam requirements, you may be required to complete Division LF (Lateral Forces) of the Architect Registration Examination (ARE).
4. Submit a written summary of Washington laws and rules. See page 1.
5. Complete an oral interview, if you don't have an accredited degree or IDP. The board may waive this requirement for applicants with an NCARB "Blue Cover" certificate.

How to apply if you have an NCARB council record

Have NCARB transmit your council record to our office and submit all of the following:

1. Architect Registration Initial Application (Sections 1, 3, and 5).
2. A check or money order, payable to the Department of Licensing, for the \$325 fee (\$250 for the reciprocity application fee and \$75 for the initial 2-year registration fee).
3. A written summary of Washington laws and rules. See page 1.

How to apply if you don't have an NCARB council record

Submit all of the following:

1. A completed Architect Registration Initial Application.
2. A check or money order, payable to the Department of Licensing, for the \$325 fee (\$250 for the reciprocity application fee and \$75 for the initial 2-year registration fee).
3. A current state certification and certification of written examination from the jurisdiction where you were originally registered, including verification that you completed seismic requirements (sent directly from the issuing jurisdiction).
4. Document your practical work experience (page 4 of this form) See the [Prerequisite Requirements for NCARB Examination](#) to determine how much experience you need to report.
5. An official college transcript indicating the degree you received, sent directly from the issuing institution.
6. A written summary of Washington laws and rules. See page 1.

Once filed, this application is a public record and is subject to public disclosure. RCW 42.56

Architect Registration Initial Application

You can use this form to apply for a Washington architect license. Send this completed form and a check or money order, payable to Department of Licensing, to:

**Washington State Board for Architects
Department of Licensing
PO Box 9048
Olympia, WA 98507-9048**

Phone (360) 664-1388
Fax (360) 570-7098

For validation only

003-070-208-0000

Application method (check one):

- Examination Reciprocity Direct registration

1. Personal information

PRINT or TYPE Name (Last, First, Middle—will appear in the proper order on your wall certificate)				Maiden name (if any – will not appear on certificate)	
Social Security number*			Date of birth		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing address					
City		State	ZIP code	County	
(Area code) Daytime telephone number	(Area code) Residence telephone number		Email address		
Would you like to be added to the Board's electronic mailing list? <input type="checkbox"/> Yes <input type="checkbox"/> No			If NCARB certified, enter certification number		

*State Law, RCW 26.23.150, requires all applicants to furnish their Social Security number when applying for this license. If this application is for a business that is a sole proprietorship, the proprietor must furnish his/her Social Security number. An application with incomplete information will not be processed.

Reciprocity only

Current state of licensure	Date of original registration	Registration number	State where qualifying exams taken
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2. Educational background

Name of colleges, universities, technical schools	Location	Dates of attendance		Degree
		From	To	

Applicable education and supplemental training	Location	Dates of attendance		Certificate/degree, etc.
		From	To	

3. Licensing and legal history

Answer the following

Have you ever been convicted of a felony or misdemeanor other than a traffic violation? Yes No

Has your registration been revoked, suspended, or denied in any licensing jurisdiction? Yes No

Have you received any disciplinary action in another jurisdiction? Yes No

If you answered "Yes" to any of the above, attach an explanation on a separate 8 1/2" x 11" sheet.

4. Qualifying experience Place in chronological order (Most recent first)

Include only practical work experience performing activities involved in the practice of **architecture**. A resumé alone is not enough.

Full name and complete current address of employer, including self employment and military service	Period of employment Month/Year	Total hours worked per week	Nature of service performed List types of projects, major duties	Verifier name – Should match the name listed on your Employment and Experience Summary Form (p. 5)
	From To			
	From To			
	From To			
	From To			

If additional space is required, please attach an 8 1/2" x 11" sheet.

5. Certification

Unsigned applications will not be accepted by the board. Before signing the application, you must familiarize yourself with the architect laws and rules. If you are downloading the application packet from the architect web site, also download the RCWs (laws) and WACs (rules) posted there.

Answer the following

1. Do you agree to abide by all the applicable laws and rules regarding the practice of architecture? Yes No
2. Do you authorize any business associates (past and present) and any governmental agencies (local, state, or federal) to release any information, files, or records which may be required for a background investigation, to the Department of Licensing? Yes No
3. Do you understand that any false information in this application may constitute cause for the denial, suspension, or revocation of your license to practice in the state of Washington? Yes No

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

X _____
Applicant signature

Date and place

Architect Applicant Employment and Experience Summary

Washington State Board for Architects, Department of Licensing, PO Box 9048, Olympia, WA 98507-9048

Phone (360) 664-1388; Fax (360) 570-7098

Please check one:

Examination Reciprocity

The individual whose name appears below has applied for registration to the Washington State Board for Architects. As a former supervisor, the information you provide will be used to determine the applicant's eligibility for entrance into the exam process or for reciprocal registration. **Specific dates are important.**

6. Employment verification

Applicant name																					
Address (Address, City, State, ZIP code)																					
Worked under my supervision at (name of firm)																					
From (Month, Day, Year)	To (Month, Day, Year)	Total months	Avg. hours per week																		
Check the following activities the applicant performed: <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Programming client contact</td> <td><input type="checkbox"/> Building cost analysis</td> <td><input type="checkbox"/> Construction (observation)</td> </tr> <tr> <td><input type="checkbox"/> Engineering systems coordination</td> <td><input type="checkbox"/> Bidding and contract negotiations</td> <td><input type="checkbox"/> Construction documents (graphic)</td> </tr> <tr> <td><input type="checkbox"/> Site and environmental analysis</td> <td><input type="checkbox"/> Code research</td> <td><input type="checkbox"/> Project management</td> </tr> <tr> <td><input type="checkbox"/> Specifications and materials research</td> <td><input type="checkbox"/> Construction (office)</td> <td><input type="checkbox"/> Office management</td> </tr> <tr> <td><input type="checkbox"/> Schematic design</td> <td><input type="checkbox"/> Design development</td> <td><input type="checkbox"/> Other: _____</td> </tr> <tr> <td><input type="checkbox"/> Document checking and coordination</td> <td></td> <td></td> </tr> </table>				<input type="checkbox"/> Programming client contact	<input type="checkbox"/> Building cost analysis	<input type="checkbox"/> Construction (observation)	<input type="checkbox"/> Engineering systems coordination	<input type="checkbox"/> Bidding and contract negotiations	<input type="checkbox"/> Construction documents (graphic)	<input type="checkbox"/> Site and environmental analysis	<input type="checkbox"/> Code research	<input type="checkbox"/> Project management	<input type="checkbox"/> Specifications and materials research	<input type="checkbox"/> Construction (office)	<input type="checkbox"/> Office management	<input type="checkbox"/> Schematic design	<input type="checkbox"/> Design development	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Document checking and coordination		
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<input type="checkbox"/> Schematic design	<input type="checkbox"/> Design development	<input type="checkbox"/> Other: _____																			
<input type="checkbox"/> Document checking and coordination																					
Describe roles and responsibilities																					

7. Verifier's information – To be completed by the experience verifier

The person whose name appears above has applied to the board for architect licensing. Your information will be used to determine the applicant's eligibility for licensure. If you are not licensed as an architect please attach a copy of your résumé. Mail this completed form to the board's office at the address shown above.

Verifier name	Title		
Verifier current organization	(Area code) Telephone number		
Organization address (Address, City, State, ZIP code)			
Comments			
Your state of licensure	License type	License number	Year of licensure
The Washington State Board for Architects requires that no person shall be eligible for registration as an architect who is not of good character and reputation. If you believe this applicant does not satisfy this requirement, please explain:			

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date and Place signed

X
Signature