



New Mexico Architectural Broadly Experienced Application

Name: _____ Date: _____
Last First M.I.

SSN#: _____ Date of Birth: _____

The following statement is made pursuant to the Privacy Act of 1974§7(8). Disclosure of your Social Security Number is mandatory. Solicitation of your Social Security Number is solely for Tax Administration purposes pursuant to 36 M.R.S.A § 175 as authorized by the Tax Reform Act of 1975 (42 U.S.C§495(C)(2)(C)(1). Your Social Security Number will be used by the Department of Taxes and the Department of Employment and Training in the administration of tax laws to identify individuals affected by such laws, and by the Office of Child Support.

Are you a Military Service Member, Spouse or Veteran (within the last two years)? Yes____ No____

Firm Name: _____

Address: _____

Office Phone #: _____ Cell Phone #: _____

Email: _____

Residential Address: _____

Cell Phone #: _____

Email: _____

Citizenship: Naturalized____ Birth____ Other Citizenship_____

I hereby apply for registration and license to practice architecture in New Mexico by special application as a broadly experienced architect. I hold a current and valid registration issued by the licensing authority of another NCARB jurisdiction and have held such registration with no disciplinary action for at least five (5) years. I do not qualify for NCARB certification.

State of Registration: _____ License: _____ Year Licensed: _____

I hold other registrations as follows: registrations presently in good standing. Include the state and year in which each of these was required. Use an additional page as necessary. (List architectural, engineering, planning, etc.)

Part A

Education Background

Colleges, Universities, and Technical Schools-

(List name and location of institution, dates of attendance and degrees obtained. Provide Board with an official transcript, to be transmitted directly to the Board office from the institution.)

Travel, Continuing Education Research and Publications-

(Please indicate here if you have applicable documentation and attached documentation to this application.)

Part B

Professional Organization Service-

(Please list the name of professional organization that you are a part of, including offices held.)

Part C

Practical Experience

Full name & current address of Employer (Begin with the most recent & include military experience.)	Dates of Employment	Full or Part Time (If part time, please note average hours per week, describe in detail other type of work.)	Indicate & Explain- whether General Practice of Architecture, Teaching & Research, Public Service or Other

Part D

Examples of Experience

(Include attachments for each of the following items. Identify each with your complete name and with the label of section.)

1. Design and Construction

(Include at least three (3) design and construction document sets for (3 projects) generated under your direct supervision in the state where you are licensed. All documents should bear your seal and dates.) **OR** (Include at least three (3) design and construction document sets for (3 projects) worked on by you while under the direct supervision of a licensed architect in one of the current NCARB jurisdictions that is in good standing. All sets do not have to be stamped by the same architect, but each architect of record must create and sign an affidavit attesting to your participation and your technical and design proficiency (electronic submissions preferred.))

2. Construction Administration

(List at least three (3) specific projects in which you were in a supervisory capacity regarding construction administration. Describe your specific duties in each example.)

3. Management

(Describe your experience in the role of management (project/office).)

4. Other

(List and describe any activities you consider relevant. Public or community service may be included. Please provide proof of New Mexico residency (i.e. utility bill, etc.))

5. Architect References

(Provide letters of reference from three (3) separate licensed architects who are personally acquainted with your professional abilities. Please give names, addresses, phone numbers and email addresses for each reference.)

AFFIDAVIT

STATE OF _____

COUNTY OF _____,

_____ being duly sworn, do hereby depose and swear:

1. That I have read and will comply with the provisions of the New Mexico Architectural Act, §61-15-1 to §61-15-13 NMSA 1978, and the Rules and Regulations adopted thereunder;
2. That I am not now under any disciplinary proceedings or action, pending or otherwise, in any other jurisdiction;
3. That I have never been convicted of a felony; and
4. That prior to the signing of this affidavit, I have not represented myself as an architect, either verbally or on any printed matter, in the State of New Mexico, nor will I do so until such time as my architectural license has been issued by the New Mexico Board of Examiners for Architects.
5. That prior to the signing of this affidavit, I have not performed or offered to perform architectural services in the State of New Mexico, nor will I do so until such time as my architectural license has been issued by the New Mexico Board of Examiners for Architects.

Signature of Applicant

GIVEN UNDER MY HAND AND NOTARIAL SEAL THIS _____ DAY OF _____ NOTARY PUBLIC _____

MY COMMISSION EXPIRES: _____

NOTARIAL SEAL STAMP



Please include a recognizable photo in
this space

**Photo must be signed by you and
dated.**

Approximate photo size
2 ½ X 2 ½