Commonwealth of Virginia
Department of Professional and Occupational Regulation
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Richmond, Virginia 23233-1485
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Department of Professional and Occupational Regulation

Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects

INTERIOR DESIGNER CERTIFICATE - UNIVERSAL LICENSE RECOGNITION APPLICATION

Fee $90.00

➢ **DPOR may require an individual seeking a professional or occupational licensure or government certification pursuant to the Code of Virginia, §54.1-205 to pass an examination specific to relevant state laws.**

A check or money order payable to the TREASURER OF VIRGINIA, *or* a completed credit card insert must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

Select **one** license type you are requesting:

X	License Type	Trans
☐	0412 - Interior Designer	1020
☐	0412 - Unlicensed/Uncertified Interior Designer - ULR by Exam	1021

1. Have you ever held a license and/or certificate issued by the Virginia Department of Professional and Occupational Regulation?
   No ☐ Yes ☐

2. Full Legal Name (As it appears on your government issued ID or other legal documentation.)

   Last (required) _____ First (required) _____ Middle _____ Generation _____

3. Provide at least **one** of the following identification numbers✳:
   ☐ ***Social Security Number*** *and/or* ☐☐☐ - ☐☐ - ☐☐☐☐
   ☐ ***Virginia*** DMV Control Number ☐☐☐☐☐☐☐☐☐
   ➢ Enter the same identification number as used on examination, previous applications or licenses on file with the department.
   ✳ State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the ***Virginia*** Department of Motor Vehicles.

4. Date of Birth _____ (MM/DD/YYYY)

5. Maiden or Former Name(s) _____

6. Mailing Address (PO Box accepted)
   The mailing address will be printed on the license.
   _____
   City _____ State _____ Zip Code _____

7. Street Address (PO Box not accepted)
   PHYSICAL ADDRESS REQUIRED
   ☐ Check here if Street Address is the same as the Mailing Address listed above.
   _____
   City _____ State _____ Zip Code _____

8. Contact Numbers
   Primary Telephone _____ Alternate Telephone _____

9. Email Address _____
   Email address is considered a public record and will be disclosed upon request from a third party.

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
					0412	

10. Applicants who hold a ***current*** license/certificate:

A. Do you hold a ***current*** (non-Virginia) license or certificate issued by a regulatory board or government entity?

No ☐ If no, skip to question #11.

Yes ☐ If yes, have you held this license/certificate for at least 3 years?

No ☐ If no, you do not qualify for the Universal license. You may apply using the Board's certification application.

Yes ☐

B. Did your current state or your state of original licensure/certification require you to pass an examination?

No ☐ If no, you do not qualify for the Universal license. You may apply using the Board's certification application.

Yes ☐ If yes, did that state require you to complete any education, training and/or experience requirements to obtain this license/certificate?

No ☐ If no, you do not qualify for the Universal license. You may apply using the Board's license/reciprocity application.

Yes ☐

C. Complete the following table and include all **current** and **expired** licenses and/or certification issued from any state, territory, possession, or jurisdiction of the United States.

Complete the Verification of Interior Designer Examination and Certification Form to provide evidence of having passed the NCIDQ examination.

State/Jurisdiction	License, Certification or Registration Number	Did you pass an examination?	Expiration Date
		Yes ☐	
		Yes ☐	
		Yes ☐	
		Yes ☐	
		Yes ☐	
		Yes ☐	

D. Do you have any unresolved complaints or investigations pending against you at the time you submitted this application?

No ☐

Yes ☐ If yes, please give a brief description of this complaint/pending investigation:

Skip to question #12.

11. For applicants who **do not hold a current** license or certificate.

A. Do you work in a state, or jurisdiction of the United States (other than Virginia) that does not regulate your profession?

No ☐ If no, you do not qualify for the Universal license. You may apply using the Board's license application.

Yes ☐ If yes, have you worked in this profession for a least three years?

No ☐ If no, you do not qualify for a Universal License at this time. You may apply using the Board's license application.

Yes ☐

B. Have you ever passed an examination for this profession in any state or territory of the United States?

No ☐ If no, you **may** be required to take the Virginia examination upon the Board's review of your application. Applicant will be notified by the Board when they are eligible to sit for the examination.

Yes ☐ If yes, provide the Verification of Interior Designer Examination and Certification Form to provide evidence of having passed the NCIDQ examination.

C. List all the state or jurisdiction of the United States where you have practiced this profession:

State/Jurisdiction	Profession/Occupation	Dates of Employment*	
		Start (MM/YY)	Finished (MM/YY)

*Show a minimum of 3 years of employment.

D. An *Experience Verification Form* must be complete and submitted along with this application. Is one attached?

No ☐ Yes ☐ If yes, provide a completed Interior Designer *Experience Verification Form*.

12. Have you ever been subject to a **disciplinary action** taken by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, complete the Disciplinary Action Reporting Form.

13. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony**?

No ☐

Yes ☐ If yes, complete the Criminal Conviction Reporting Form.

B. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any non-marijuana **misdemeanor** ?

No ☐

Yes ☐ If yes, complete the Criminal Conviction Reporting Form.

14. By signing this application, I certify the following statements:

- I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
- I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
- I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
- I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
- I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 4, *of the Code of Virginia* and the *Virginia Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects Regulations.*

Signature _____ Date _____