



South Carolina Department of Labor, Licensing and Regulation

**South Carolina Board of
Landscape Architectural Examiners**

110 Centerview Dr. • Columbia • SC • 29210

P.O. Box 11419 • Columbia • SC 29211-1419

Phone: 803-896-4580 • Contact.LSA@llr.sc.gov • Fax: 803-896-4427

www.llronline.com/POL/LandscapeArchitect/



Application Instructions for Pre-Approval to Sit for the Landscape Architect Registration Examination (LARE)

The following additional materials are required to be downloaded or mailed to the Board office in order to complete the application.

- CLARB Council Record.
- Copy of your social security card.
- Copy of your driver's license, passport, or state-issued, photo identification.
- Legal documentation of name change, if applicable (marriage cert, divorce decree, etc).
- **If you have a "yes" answer on the "Personal History" section**, provide a written statement and copy of the appropriate court order for criminal convictions, or a Board order for disciplinary issues.
- **If you are not a United States Citizen**, provide a copy of immigration documents:

ACCEPTED IMMIGRATION DOCUMENTS:

Unexpired Reentry Permit (I-327)

Permanent Resident Card or Alien Registration Receipt Card with Photograph (I-551)

Unexpired Refugee Travel Document (I-571)

Unexpired Employment Authorization Card which Contains a Photograph (I-766)

Machine Readable Immigrant Visa (with Temporary I-551 Language)

Temporary I-551 Stamp (on passport or I-94)

I-94 (Arrival/Departure Record) in Unexpired Foreign Passport

I-20 (Certificate of Eligibility for Nonimmigrant, F-1, Student Status)

DS2019 (Certificate of Eligibility for Exchange Visitor, J-1, Status)

Contact the applicable contact below and have the following documentation submitted on your behalf directly to the Board.

- Two professional references that are not on your CLARB Council Record. The LA Confidential Reference Information Regarding Applicant Application (to send to Professional References) is available at <http://www.llronline.com/POL/landscapearchitect/index.asp?file=pub.htm>

Documents can be downloaded at the end of the application process, or sent to the Board at the above listed address. Ensure documentation is clear and legible.



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CONFIDENTIAL REFERENCE INFORMATION REGARDING APPLICANT

APPLICANT COMPLETE THIS SECTION Date: _____
(Name) of (Address)

Return completed form to above address.

The above referenced individual has submitted an application for registration to practice landscape architecture in South Carolina and has submitted your name as a reference. The SC Code of Laws, Title 40, Chapter 28, regulates the practice of landscape architecture in the State of South Carolina, which practice, in turn, safeguards life, health, and property and a high professional standard. Please give complete, accurate answers to the following questions. A prompt reply would be appreciated. Additional sheets may be attached to explain answers or provide further comments.

1. How long have you known the applicant? _____

2. Was the applicant ever employed under your direct or indirect supervision? [] Yes [] No

If yes, list dates: To: _____ From: _____

Hours per week: _____

If no, please state the basis of your opinion of the applicant's competency in landscape architecture:

3. What is your opinion of the applicant's competency in the following areas?

a. Technical Knowledge [] Excellent [] Satisfactory [] Unsatisfactory*

b. Professional Experience [] Excellent [] Satisfactory [] Unsatisfactory*

c. Professional Reputation [] Excellent [] Satisfactory [] Unsatisfactory*

Please explain "unsatisfactory" answers on an attached sheet.

4. Do you believe the applicant is fully qualified to practice landscape architecture? [] Yes [] No

Print Reference Name: _____ Title: _____

Signature: _____ Date: _____

If you are a licensed landscape architect, please provide:

State of Licensure: _____ License Number: _____



STATE OF SOUTH CAROLINA
DEPARTMENT OF LABOR, LICENSING AND REGULATION
VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES
AFFIDAVIT OF ELIGIBILITY



Pursuant to Section 8-29-10, *et seq.* of the South Carolina Code of Laws (1976, as amended), the Department of Labor, Licensing and Regulation must verify that any person who applies for a South Carolina license is lawfully present in the United States. Complete and sign this affidavit of eligibility. The information provided is subject to verification.

Section A: LAWFUL PRESENCE in the United States.

The undersigned _____, of _____
(Print clearly First, Middle, and Last name) (Home Address, City, State, and Zip Code)
 being first duly sworn deposes and states as follows:

Check only one box:

1. I am a United States citizen; or

2. I am a Legal Permanent Resident of the United States eighteen years of age or older; or

3. I am a Qualified Alien or non-immigrant under the Federal Immigration and Nationality Act, Public Law 82-414, eighteen years of age or older, and lawfully present in the United States.

4. Other: _____ Please submit any documentation that supports this status.

Date of Birth: _____

Alien Number: _____ I-94 Number: _____

(If you checked number 2, 3, or 4 you must attach a copy of your immigration documents. See instruction sheet for a list of accepted immigration documents.)

Section B: ATTESTATION.

I understand that in accordance with section 8-29-10 of the South Carolina Code of Laws, a person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall, in addition to other sanctions imposed by this State or the United States, be guilty of a felony, and upon conviction must be fined and/or imprisoned for not more than 5 years (or both).

I understand that the representations made in this Affidavit shall apply through any license(s) or renewals issued, and that I shall have an affirmative duty to immediately advise the Department of Labor, Licensing and Regulation of any change of my immigration or citizenship status.

I swear and attest the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension, or revocation of a license, certificate, registration or permit.

Signature of Affiant

SWORN to before me this _____ day of _____, 20_____

Notary Signature

Print Name

Notary Public for _____

My Commission Expires: _____

INSTRUCTION SHEET FOR COMPLETING AFFIDAVIT OF ELIGIBILITY

CHECK box 1:

If you are a United States Citizen by birth or naturalization

CHECK box 2:

If you are a Legal Permanent Resident and you are not a U.S. Citizen, but are residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

CHECK box 3:

If you are a Qualified Alien. You are a Qualified Alien if you are:

An alien who is lawfully admitted for residence under the INA.

An alien who is granted asylum under Section 208 of the INA.

A refugee who is admitted to the United States under Section 207 of the INA.

An alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year.

An alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3).

An alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

An alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980.

An alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

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