

NEW HAMPSHIRE DRAFTING AND PROCEDURE MANUAL

APPENDIX II-H
INCORPORATION BY REFERENCE STATEMENT

****PLEASE LIST THE FOLLOWING:**

1. Name of Agency. **New Hampshire Board of Architects**

2. Person who has reviewed the material to be incorporated into the agency's rules:

Name:	Tina M. Kelley	Title:	Program Specialist IV
Address:	c/o Office of Professional Licensure and Certification 7 Eagle Square Concord, NH 03301	Phone #:	(603) 271-5247

3. Specific rule number where the material is incorporated: **Arch 302.02, Arch 304.01(a), and Arch 308.01(c)**

****PLEASE ATTACH THE FOLLOWING**, numbered to correspond to the number on this sheet (a separate sheet is not required for every item):

4. The complete title of the material which is to be incorporated including the date on which the material became effective (or a document identification number) or, if the material is undated Internet content, the date the material was accessed and printed, and the title of the entity that created or promulgated the material.

5. How the agency modified the text of the material incorporated, clearly identifying where amendments have been made to the text.

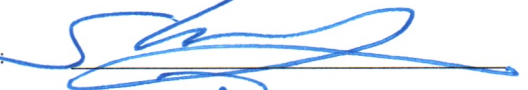
6. How the material incorporated can be obtained by the public (include cost and the address of the unrelated third party which published the material, and the Internet source URL if it appears in the rule, for example if the material is Internet content only available online).

7. Why the agency did not choose to reproduce the incorporated material in full in its rules. The discussion shall include more than the obvious reason that it is less expensive to incorporate by reference.

****PLEASE SIGN THE FOLLOWING:**

I, the adopting authority,* certify that the text of the material which the agency is incorporating by reference in these rules has been reviewed by this agency. To the best of my knowledge and belief, this agency has complied with the requirements of RSA 541-A:12, IV and Section 3.12 of Chapter 4 of the Drafting and Procedure Manual for Administrative Rules. I further certify that the agency has the capability and the intent to enforce the material incorporated into the rules, as identified above.

Date: 1/11/2022

Signature: 

Name: Sheldon Penoyer

Title: Board Member

*("Adopting authority" is the official empowered by statute to adopt the rule, or a member of the group of individuals empowered by statute to adopt the rule.)

NEW HAMPSHIRE DRAFTING AND PROCEDURE MANUAL

Attachment

4. “The National Council of Architectural Registration Boards Certification Guidelines”, adopted by the National Council of Architectural Registration Boards on July 2021.
5. The Board of Architects has not modified this text from its original version.
6. The material incorporated can be obtained by the public, free of charge, at the National Council of Architectural Registration Boards website,
https://www.ncarb.org/sites/default/files/Certification_Guidelines.pdf
7. The National Council of Architectural Registration Boards (“NCARB”) is a nonprofit organization in collaboration with licensing boards, facilitates the licensure and credentialing of architects to protect the health, safety and welfare of the public. As a global leader the NCARB accomplishes its mission by recommending and encouraging national requirements for architectural licensure.

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APPENDIX II-H
INCORPORATION BY REFERENCE STATEMENT

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2. Person who has reviewed the material to be incorporated into the agency's rules:

Name: **Tina M. Kelley** Title: **Program Specialist IV**
Address: **c/o Office of Professional Licensure and Certification** Phone #: **(603) 271-5247**
7 Eagle Square
Concord, NH 03301

3. Specific rule number where the material is incorporated: **Arch 302.02, Arch 304.01(a), and Arch 308.01(c)**

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Date: 1/11/2022

Signature: 

Name: Sheldon Penney

Title: Board Member.

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NEW HAMPSHIRE DRAFTING AND PROCEDURE MANUAL

Attachment

4. “The National Council of Architectural Registration Boards Education Guidelines”, adopted by the National Council of Architectural Registration Boards on January 2021.
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6. The material incorporated can be obtained by the public, free of charge, at the National Council of Architectural Registration Boards website,
<https://www.ncarb.org/sites/default/files/Main%20Website/Data%20&%20Resources/Guidelines/EducationGuidelines.pdf>
7. The National Council of Architectural Registration Boards (“NCARB”) is a nonprofit organization in collaboration with licensing boards, facilitates the licensure and credentialing of architects to protect the health, safety and welfare of the public. As a global leader the NCARB accomplishes its mission by recommending and encouraging national requirements for architectural licensure.



State of New Hampshire
OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION
DIVISION OF LICENSING AND BOARD ADMINISTRATION
 7 Eagle Square, Concord, NH 03301-2412
 Phone: 603-271-2152

Application for Initial New Hampshire Licensure as an Architect
\$155.00 Licensure Fee

- NCARB Certification/Record
 Direct to State Reciprocity

The application must be legible and filled out completely

NCARB applicants only must fill out sections 1, 2, 3, 5 and 8

1. Applicants General information

Name:		
Last	First	Middle
Names Previously Used (if applicable):		SS#
		Date of Birth:
Home Mailing Address:		
Home Phone #:	E-mail Address:	
Employers Name:		
Employers Address:		
Employers Phone		

2. Registration/Licensure Information

Have you ever taken and passed the Architectural Registration Exam (ARE)?		
If yes indicate:	Location:	Date Completed:
State in which first registered or licensed as an Architect		
Date of Licensure	License Number	Licensed by ARE Exam?
If not how?	Is License now in force?	
If not in force, indicate why		
Have you ever applied for an architect's license in New Hampshire ?		Status
Are you applying for facilitated licensure as a military spouse?		

3. General Information Questions

CHECK ONE:	YES	NO
1. Have you ever been convicted of any felony or any misdemeanor, or a violation involving architecture or the practice of architecture, which has not been annulled? If so, name the court, the details of the offense and the date of conviction and the sentence imposed.	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever lost or been denied registration/licensure as an architect or disciplined or sanctioned by another licensing board in any other state or jurisdiction and if so, an explanation of the circumstances?	<input type="checkbox"/>	<input type="checkbox"/>
If the answer is yes to any of the above questions, submit a written explanation with your application		
NCARB RECORD		
1. Have you ever held an NCARB Council Record?	<input type="checkbox"/>	<input type="checkbox"/>
2. I have requested NCARB to transmit my Council Record to the Board Office on:		
ARCHITECTURAL EXPERIENCE PROGRAM (AXP) INFORMATION:		
1. Have you completed AXP?	<input type="checkbox"/>	<input type="checkbox"/>
If yes indicate:		
Date Completed:		AXP Record Number (if applicable):
Date you requested NCARB transmit your AXP record to the Board:		

4. Education

1. Official transcripts, of architecture related degrees, are required to be included with this application unless verified and submitted through NCARB

INSTITUTION AND LOCATION	FROM	TO	MAJOR	DEGREE AWARDED/DATE
Have you obtained a High School Diploma or equivalency?			<input type="checkbox"/>	<input type="checkbox"/>
Post -Secondary School:				
1.				
Colleges and Universities:				
1.				
2.				
3.				
4.				

Applicants who are graduates of a non-United States or Canadian institution must have his or her transcript sent directly from the institution to NCARB. The applicant shall submit translation and authentication with the application

5. References of Character and Qualifications

Applicant will give the name and address of not fewer than five individuals, unrelated to the applicant, of whom at least three shall be licensed architects in good standing, having personal knowledge of the applicant's experience. No member of the board will be accepted as reference. Name of persons listed under item 7, "Experience," may also be used as references.

Name	Address including zip code	Phone Number	Occupation/License	Business Relationship to Applicant

6. Practical Experience

This information described below is a summary of your experience and should start with your first employer.

Key	Date	1. Name of Employer- Title of Position	Name and present address of someone familiar with each position, preferably person to whom applicant reported or with whom he/she was associated.
	Indicate years	2. Location and Character of Each Position	
	From to	3. Degree of Responsibility	

7. Supplementary Experience Record

The information described below is your supplementary experience record of the architectural projects or assignments you were involved in and should start with your first project or assignment. Please use a separate sheet if necessary.

Brief description and identification of the project or assignment by job title, location, and total cost	Indication as to which of the employers listed in (6) for which the project or assignment was undertaken	Identification as to what portion of the work you were personally responsible for

8. Affidavits

I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the certificate of licensure, as applied for, but also to the retention of said certificate, if issued.

Signature of Applicant

Date

APPLICATION CHECKLIST

Candidate Name

Before you mail your application to the Board, please check the following items carefully. Your attention to these details will make it possible for the Board Staff to process your application without delay.

Applicants who hold a National Council of Architectural Registration Boards Certificate/Registration (NCARB) shall complete sections 1, 2, 3, 5 and 8 only; all others shall complete the entire form and request all supporting documentation.

Have you:

- Marked the box on the application form indicating which address you want us to use?
- NCARB record/certification holders - Have you contacted NCARB to transmit your record to the Board?
- Signed and dated the application?
- Included this Checklist with your application?
- I am aware that if I am approved for licensure; my licensing approval letter and all pertinent information will be sent to me at my on-file e-mail address only.
- I have read and understand the New Hampshire state statutes as they pertain to the practice of Architecture
- I have read and understand New Hampshire administrative rules Arch 100-500

***These items are additional items required for applicants through Direct-to-State Reciprocity.**

- *Completed the "References" portion of the application, sent reference forms, received them back and have included them with this application**
- *Included your college/university transcript(s)?**
- *Received verification from the state board/s where you currently or previously held a license and have included it/them with this application**



State of New Hampshire
OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION
DIVISION OF LICENSING AND BOARD ADMINISTRATION
 7 Eagle Square, Concord, NH 03301-2412
 Phone: 603-271-2152

Application for Reinstatement of Licensure as an Architect

\$355.00 Reinstatement Fee

The application must be legible and filled out completely

Name:		
Last	First	Middle
Names Previously Used (if applicable):		Date of Birth:
Home Mailing Address:		
Home Phone #:	E-mail Address:	
Employers Name:		
Employers Address:		
Employers Phone		

	CHECK ONE:	YES	NO
1. Have you ever been convicted of any felony or any misdemeanor, or a violation involving architecture or the practice of architecture, which has not been annulled or previously reported? If so, name the court, the details of the offense and the date of conviction and the sentence imposed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever lost or been denied registration/licensure as an architect or disciplined or sanctioned by another licensing board, which has not been previously reported, in any other state and if so, an explanation of the circumstances?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I attest that I have complied with the continuing education requirements of Arch 403.08 – You must submit either: Certificates of attendance or completed continuing education transcripts from a professional society or institution for all credits claimed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If the answer is yes to any of the above questions, submit a written explanation with your application			

References of Character and Qualifications

Applicant will give the name and address of not fewer than three licensed architects, unrelated to the applicant, all of which are in good standing, having personal knowledge of the applicant's experience. No member of the board will be accepted as reference. Reference forms must be sent to the listed reference by the licensee. The licensee must then submit the required reference forms with the reinstatement application.

Name	Address including zip code	Phone Number	Occupation/License	Business Relationship to Applicant

I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the certificate of licensure, as applied for, but also to the retention of said certificate, if issued.

Signature of Applicant

Date

Readopt with amendments Arch 301.01, effective 8-5-15 (Document #10904), to read as follows:

Arch 301.01 Application Process.

(a) Each person wishing to become licensed as an architect shall submit the following:

- (1) An ~~[an]~~ “Application for Initial New Hampshire Licensure as an Architect” form **revised 12/13/2021** which contains the information specified in Arch 301.02;

- (2) The certified copy of transcripts from all post-secondary institutions attended, as described in Arch 301.02~~[(a)(7)](b)(4)c.~~, if applying directly from another state and without NCARB certification;

- (3) The references, as specified in Arch 301.03 and Arch 301.04, if applying directly from another state and without **National Council of Architectural Registration Boards** (NCARB) certification;

- (4) License verification, if applying direct from state and without NCARB certification; and

- (4) The application fee as specified in Arch 305.0~~[1]~~**2**.

(b) An application for licensure, which is not signed by the applicant, or is not accompanied by a certified check, money order, or credit card payment for the application fee shall not be accepted and shall be returned to the applicant.

(c) A person whose qualifications for licensure do not meet the requirements specified in RSA 310-A:38 shall be denied a license.

(d) If the application for licensure is denied, the applicant shall be provided an opportunity to request a hearing on the deficiency issues identified by the board in the same manner as for motions for rehearing pursuant to Arch 213. Any such request shall be made in writing and submitted to the board within 30 days of the receipt of the notification of denial.

(e) Applications for licensure, when there has been no communication by the applicant to the board for at least one year, shall be destroyed.

Readopt with amendments Arch 301.02, effective 8-14-19 (Document #12847), to read as follows:

Arch 301.02 Application for Licensure.

(a) Each applicant for licensure shall complete the “Application for Initial New Hampshire Licensure as an Architect,” form, ~~[amended]~~ **revised** 12/13/2021. ~~[National Council of Architectural Registration Boards (NCARB)]~~ certificate and record holders shall complete sections 1, 2, 3, 5, and 8 only. All others shall complete the entire form.

(b) The following information shall be provided on the form:

- (1) Section 1, “**Applicants** General Information,” which includes:

a. How the applicant is applying for licensure by checking one of the following:

1. NCARB certification/Record; or

2. Direct to State by Reciprocity;

~~[a.]~~**b.** ~~[The applicant's]~~ **Full legal** name, including any names previously used;

~~[b.]~~**c.** ~~[The applicant's residence and business name and]~~ **Home mailing** address[es], telephone number[s], and e-mail address;

~~[e.]~~**d.** ~~[The applicant's]~~ **D**ate of birth; ~~[and]~~

~~[d.]~~**e.** ~~[The applicant's]~~ **S**ocial security number required pursuant to RSA 161- B:11, VI-a; **and**

f. Name of place of employment, address and phone number;

(2) Section 2, "Registration/Licensure Information," which includes:

a. Whether the applicant has ever taken the Architectural Registration Examination (ARE), and if so, the location, and date completed;

b. The state in which the applicant was first registered or licensed as an architect, if any, including:

1. The date of licensure in that jurisdiction;

2. The applicant's license number in that jurisdiction; and

3. Whether the applicant was licensed by the ~~[Architectural Registration Examination (ARE)]~~, or, if not, how the applicant was licensed;

c. Whether the applicant still holds the registration or license listed in (b)(2)b~~1~~₂ above and if not, the reasons why;

d. Whether the applicant has ever applied for an architect's license in New Hampshire and, if so, the status; and

e. Whether the applicant is applying for facilitated licensure as a military spouse;

(3) Section 3, "General Information Questions," which includes:

a. Whether the applicant has ever been convicted of any felony or any misdemeanor, or a violation involving architecture or the practice of architecture **which was not annulled** ~~[, unless annulled]~~, and if so, the name of the court, the details of the offense, the date of conviction, and the sentence imposed;

b. Whether the applicant has ever lost or been denied registration or licensure as an architect or been disciplined or sanctioned by another licensing board in any other state or jurisdiction if so, an explanation of the circumstances;

- c. Whether the applicant has ever held a NCARB certificate, and if so, whether the candidate has requested the NCARB certificate be transmitted to the board office and the date the transmission was requested;
- d. Whether the applicant has completed the Architectural Experience Program (AXP), and if so, the date completed, AXP number if applicable, and the date the candidate has requested the AXP record be transmitted to the board office; and

(4) Section 4, “Education,” regarding the applicant’s educational history, including:

a. Whether or not the applicant has obtained their high school diploma or equivalency.

~~[a-]~~**b.** The names of all ~~[high school and]~~ post-secondary institutions attended;

~~[b-]~~**c.** The dates of attendance, major and degrees awarded; and

~~[e-]~~**d.** Certified copies of transcripts from all post-secondary institutions where architectural credit was obtained. If the applicant for licensure is a graduate of a non-United States or Canadian institution, the applicant shall have his or her transcripts sent directly from the institution to NCARB. The applicant shall request translation and authentication be sent from NCARB directly to the board office for evaluation by the board;

(5) Section 5, 5 individuals to be the applicants “References of Character and Qualifications,” which shall include:

- a. The names of the references;
- b. A complete addresses for each reference;
- c. A phone for each reference;
- d. The occupation of each reference; and
- e. Business relationship with the applicant as specified in Arch 301.03;

(6) Section 6, “Practical Experience,” which includes:

- a. The applicant’s dates of employment, character of employment, title, and present address of all employers;
- b. The applicant’s position title and description of duties for each position including types of work performed and degree of responsibility; and
- c. Name and present address of someone familiar with each position listed in ~~(b)(7)b~~**(b)b.** above;

(7) Section 7, “Supplementary Experience Record,” which includes a supplementary experience record of the architectural projects or assignments the applicant was involved in, including the following information:

- a. A brief description and identification of the project or assignment by job title, location, and total cost;
- b. An indication as to which of the employers listed in (6) above for which the project or assignment was undertaken; and
- c. An identification as what portion of the work the applicant was personally responsible for; and

(8) Section 9, “Affidavits”, which includes:

- a. An affidavit stating the following: “I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in the application are material, not only to the issuance of the certificate of licensure, as applied for, but also to the retention of said certificate, if issued;” and
- b. The applicant’s signature and date.

(c) Applicants shall pay the application fee specified in Arch 305.02.

Readopt with amendments Arch 301.04, effective 8-5-15 (Document #10904), to read as follows:

Arch 301.04 Information from References.

(a) The person providing the reference shall [~~be requested to provide the following on a form supplied by the board:~~] **complete the “Professional Reference Form” revised 12/13/2021.**

[~~(1) The applicant’s name;~~

~~(2) The reference’s name and address, relationship to the applicant, status as an architect as defined by RSA 310-A:28, I;~~

~~(3) A brief description of the reference’s knowledge of the applicant’s qualifications in the practice of architecture; and~~

~~(4) Signature of reference and date.]~~

(b) No reference form shall be accepted except **those** [~~submissions made directly to the board by the person completing the form and shall be submitted~~] **submitted** with the application **described in Arch 301.02.**

Readopt with amendments Arch 302.02, effective 8-14-19 (Document #12847), to read as follows:

Arch 302.02 Education and Training Standards. The board shall evaluate the candidates using the NCARB Certification Guidelines [~~March 2020~~] **July 2021** edition as specified in Appendix B and NCARB

Education Guidelines January 2021 edition as specified in Appendix B. All candidates for licensure shall have completed the training requirements of the Architectural Experience Program (AXP) through NCARB or have met the minimum requirements for NCARB certification pursuant to the NCARB Certification Guidelines March 2020 edition as specified in Appendix B. Applicants applying direct to [state] **the board** who have received their license after July 1, 1996 from their original state of licensure shall have completed the IDP or AXP and received the record from NCARB.

Readopt with amendments Arch 304.01, effective 8-14-19 (Document #12847), to read as follows:

Arch 304.01 Reciprocity.

(a) Candidates for licensure who are licensed or registered in another state, provided that the other state's licensure or registration requirements are consistent with Arch 302.01, the NCARB Certification Guidelines [~~March 2020~~] **July 2021** edition as specified in Appendix B, and NCARB Education Guidelines January 2021 edition as specified in Appendix B, shall apply to the board for licensure on an application for licensure form as specified in Arch 301.02 and pay the fee set forth in Arch 305.02.

(b) Verification of licensure and examination shall be obtained by the candidate for licensure and submitted to the board by the applicant at the time of submitting the application.

Readopt with amendments Arch 305.01, effective 8-5-15 (Document #10904), to read as follows:

Arch 305.01 Application, Examination and Licensure Fees.

(a) Application and licensure fees shall be in the form of money order, bank draft, credit card, or check made payable to Treasurer, State of New Hampshire.

(b) The examination fees shall be paid by the applicant directly to the test administrator.

Readopt with amendments Arch 305.02, effective 8-5-15 (Document #10904), to read as follows:

Arch 305.02 Application and Licensure Fees. The application, licensure, and related fees shall be as follows:

(a) The application fee for licensure shall be \$155.00;

(b) The biennial renewal fee shall be \$155.00;

(c) The reinstatement fee after 30 days shall be \$355.00;

(d) The application fee for certificate of authorization for architect business organizations shall be \$77.50 per year; and

(e) The biennial fee for retired status shall be \$77.50.

Repeal Arch 305.03, effective 8-5-15 (Document #10904), as follows:

~~[Arch 305.03 Replacement Fee. The fee for replacement of a lost or mutilated certificate of licensure shall be \$30.00.]~~

Readopt with amendments Arch 308.01, effective 8-14-19 (Document #12847), to read as follows:

Arch 308.01 Licensing for Active Duty Military Spouses.

(a) Each applicant for licensure who is a military spouse pursuant to RSA 332-G:7, III shall apply to the board for licensure on an application for licensure form as specified in Arch 301.02 and pay the fee set forth in Arch 305.02.

(b) Each applicant for facilitated licensing as a military spouse shall provide a copy of the military member's orders showing proof of active duty status.

(c) Each applicant who applies for facilitated licensing as a military spouse shall be eligible to obtain a facilitated license if the military spouse is licensed or registered in another state or jurisdiction, provided that the other state's or jurisdiction's licensure or registration requirements are consistent with Arch 302.01, NCARB Certification Guidelines ~~[March 2020]~~ **July 2021** edition as specified in Appendix B and NCARB Education Guidelines January 20201 edition as specified in Appendix B.

(d) License verification, if applying direct from state and without NCARB certification.

(e) A military spouse who obtains a facilitated license shall comply with all license renewal requirements pursuant to Arch 403.01.

Readopt with amendments Arch 401.05, effective 8-14-19 (Document #12847), to read as follows:

Arch 401.05 Reinstatement. An architect whose license to practice architecture in this state has been allowed to lapse for a period of 30 days or more shall:

(a) Submit to the board the "Application for Reinstatement of Licensure as an Architect," dated 12/13/2021, that includes the following:

(1) The applicant's full name, including any names previously used, and date of birth;

(2) The applicants home mailing address, telephone number, and e-mail address;

~~[(2)]~~**(3)** The applicant's ~~[business]~~ **employers** name, ~~[residence and business]~~ address~~[es]~~, **and** telephone number~~[s and e-mail address]~~;

~~[(3) A statement indicating any disciplinary or legal action brought against the applicant for his or her services as an architect not previously reported;]~~

~~[(6)]~~**(4)** Whether the applicant has ever been convicted of any felony or any misdemeanor, or a violation involving architecture or the practice of architecture, **which has not been annulled or** ~~[that was not]~~ previously reported, and if so, the name of the court, the details of the offense, the date of conviction, and the sentence imposed;

(5) Whether the applicant has lost or been denied registration or licensure as an architect or disciplined or sanctioned by another licensing board, which has not been previously reported, in any other state and if so, an explanation of the circumstances;

~~[(8)](6)~~ A statement attesting that the applicant has completed the minimum units required of approved continuing education, as specified in Arch 403.08;~~and]~~

(7) The applicants signature and date of signature below the following statement:

“I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the certificate of licensure, as applied for, but also to retention of said certificate if issued.”;

~~[(4) A statement indicating that the applicant has adhered to the ethical and professional standards of Arch 500;~~

~~(5) A representation that the applicant acknowledges that the provision of false information in the application is a basis for disciplinary action by the board;~~

~~(7) The names, complete addresses, occupation, and business relationship with applicant of 3 references from licensed architects as defined by RSA 310-A:28, I;~~

~~(9) The applicant’s signature and date; and]~~

(b) Submission of 3 professional references completed by licensed architects defined under RSA 310-A:28, I on the “Professional Reference Form” revised 12/13/2021; and

~~[(b) Applicants shall submit the application and]~~ **(c) The** reinstatement fees as specified in Arch 305.02.

Readopt with amendments Arch 403.04, effective 8-5-15 (Document #10904), to read as follows:

Arch 403.04 Record Keeping.

(a) The licensee shall maintain records to be used to support continuing education units claimed.

(b) Records required shall contain attendance verification records in the form of either:

(1) Certificates of attendance; or

(2) Completed continuing education transcripts from a professional society or institution.

(c) The licensee shall retain attendance verification records for a period of at least 4 years. Such documentation shall be made available to the board for random audit and verification purposes. Documentation shall support continuing education units claimed. Failure to provide documentation for audit verification shall result in disciplinary action.

(d) Not less than 5% of the licensees shall be randomly selected each year by the board for compliance with Arch. 403.01.

Adopt Arch 403.09 to read as follows:

Arch 403.09 Continuing Education Requirements for Reinstatement.

(a) A reinstatement application shall not be accepted for filing unless the licensee indicates on the reinstatement application, and under penalty of unsworn falsification, that he or she has completed the minimum units required of approved education required by (b) below.

(b) Each reinstatement applicant shall attest that the applicant has completed at least 24 units of continuing education in the areas of health, safety, and welfare as a condition of reinstatement, completed within the 24 months prior to reinstatement submission.

(c) All reinstatement applicants' continuing education shall be audited pursuant to Arch 403.04(c).

**APPENDIX A
STATE AND FEDERAL STATUTES/REGULATIONS IMPLEMENTED**

Rule	Statute
Arch 301.01 and 301.02	RSA 310-A:32, I(a); RSA 310-A:38, I-III; RSA 310-A:39; RSA 310-A:42
Arch 301.04	RSA 310-A:32, I(a) and (b)
Arch 302.02	RSA 310-A:32, I(b); RSA 310-A:38; RSA 310-A:39; RSA 310-A:40
Arch 304.01	RSA 310-A:32, I(b); RSA 310-A:45
Arch 305.01 and 305.02; Arch 305.03 (repealed)	RSA 310-A:32, I(e); RSA 310-A:33
Arch 401.05	RSA 310-A:32 , I(d); RSA 310-A:46
Arch 403.04	RSA 310-A:32, I (d); RSA 310-A:46; RSA 310-A:46-a
Arch 403.09	RSA 310-A:32, I (d)

**APPENDIX B
INCORPORATION BY REFERENCE INFORMATION**

Rule	Title	Obtain at
Arch 302.02 Arch 304.01(c) Arch 308.01 (c)	NCARB Education Guidelines January 2021 Edition	National Council of Architectural Registration Boards 1801 K Street NW Suite 700K Washington, DC, 20006 Phone: 202/879-0520 Fax: 202/783-0290 Available Free On-line at: https://www.ncarb.org/sites/default/files/Main%20Website/Data%20&%20Resources/Guidelines/EducationGuidelines.pdf
Arch 302.02 Arch 304.01(c) Arch 308.01 (c)	NCARB Certification Guidelines March 202[0]1 Edition	National Council of Architectural Registration Boards 1801 K Street NW Suite 700K Washington, DC, 20006 Phone: 202/879-0520 Fax: 202/783-0290 Available Free On-line at: https://www.ncarb.org/sites/default/files/Certification_Guidelines.pdf



State of New Hampshire
OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION
DIVISION OF LICENSING AND BOARD ADMINISTRATION
7 Eagle Square, Concord, NH 03301-2412
Phone: 603-271-2152

Professional Reference Form

Re: Application of _____

(NAME IS REQUIRED)

1. What is your full name _____

(NAME IS REQUIRED)

2. What is your present business or profession? _____

3. Are you a licensed Architect? Yes No If yes, in what State? _____

4. How long have you known the applicant? _____

5. Are you in any way related to the applicant? Yes No If yes, how? _____

6. What has been your business connection with the applicant? _____

7. Do you know anything reflecting adversely on the integrity or general good character of the applicant?
Yes No If yes, please specify: _____

8. Please give a brief estimate of the applicant as an architect _____

9. Would you employ the applicant in a position of trust? Yes No If no, please specify: _____

10. If the applicant is connected with a firm, please provide its name and address, and position of the Architect applicant _____

11. Is the applicant qualified to be placed in responsible charge of design or supervision of work with full authority to change designs or specification? Yes No If no, please specify: _____

12. If the applicant is in individual practice, please indicate the nature of such practice _____

13. Do you recommend the applicant for licensure as an architect? Yes No If no, please specify: _____

14. Remarks concerning the applicant _____

I make the above statements with full knowledge that the person referred to is making application for licensure to the State of New Hampshire as an Architect.

Date _____

Signature: _____