THIS PAGE TO BE COMPLETED BY APPLICANT (Please type or print)
(ONLY IF LICENSED OR CERTIFIED IN ANOTHER STATE)

APPLICANT REQUEST FOR VERIFICATION OF LICENSE OR CERTIFICATION

Applicant Name:_____ Phone: (____) _____

Street Address: _____

City: _____ State: _____ Zip:

I am requesting Interior Design Certification in the State of Minnesota and am requesting that your state board verify my status as a:

☐ Licensed Interior Designer ☐ Certified Interior Designer

_____ License Number

_____ Certificate Number

I am licensed or certified with your state board under the name of: _____.

My date of birth is: _____.

The last four (4) digits of my Social Security Number are:_____.

I have enclosed the necessary license verification fee of $ _____.
(Check with the verifying board if they require a fee for the verification)

Signature of Applicant: _____

VERIFYING AGENCY PLEASE COMPLETE OTHER SIDE OF THIS FORM
AND RETURN THIS FORM DIRECTLY TO:
MN BOARD OF AELSLAGID, 85 E. 7TH PLACE, STE. 160, ST. PAUL, MN 55101

VERIFICATION OF LICENSURE OR CERTIFICATION

TO: _____ **DATE:** _____
(Name of Board completing form)

FROM: **MINNESOTA BOARD** of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience and Interior Design
85 E. 7th Place, Suite 160, Saint Paul, MN 55101
(651) 296-2388 Fax (651) 297-5310 www.aelslagid.state.mn.us

NAME OF APPLICANT: _____

I. THE ABOVE NAMED PERSON WAS ISSUED:

		License NUMBER	DATE ISSUED	VALID UNTIL	DATE APPLIED
____	Interior Designer License	_____	_____	_____	_____
		Certificate Number			
____	Interior Designer Certification	_____	_____	_____	_____

II. Basis of Registration:

____ 1. Written Examination: NCIDQ Examination

____ 2. Grandfather provision: Please provide details on other side.

III. Investigations and/or complaints:

____ 1. Has a complaint been filed or has formal disciplinary action ever been taken against the above-named individual? If yes, please give details on reverse side.

BY: _____ BOARD SEAL

TITLE: _____

DATE: _____

IF A FEE IS REQUIRED, PLEASE NOTIFY THE APPLICANT, BUT DO NOT DELAY THE PROCESSING OF THIS FORM.