



Work Reference—Architect

Applicant Name:

Employer Name:

Employer Address:

Employer Phone:

Website:

Services Offered:

Architecture	Engineering	Construction Management	Landscape Architecture
Educator	Construction	Planning	Other _____

Your Title:

Responsibilities while employed:

Practice Management	Project Management	Programming & Analysis
Project Planning & Design	Construction & Evaluation	Project Development & Documentation

Dates of Employment (mm/dd/yyyy) From To

Average hours worked per week:

Total hours of experience at this employment:

Applicant’s Authorization and Release:

I hereby authorize the Board of Governors of the Architects, Landscape Architects and Licensed Interior Designers of Oklahoma to make inquiries of the person listed as a supervisor on this form with respect to my background and experience. I release the reference from any and all claims, including claims for libel and slander, which may arise out of any communication with the Board.

Signed _____ Date _____

(Applicant, please complete this entire page before sending to your reference/supervisor.)



220 N.E. 28th Street, Suite 150
Oklahoma City, OK 73105
T: (405) 949-2383
E: ellen.white@boardofarch.ok.gov

Page 2 to be completed only by a direct supervisor

Applicant Name:

Supervisor Name:

Firm Name:

Firm Address:

Phone:

Email:

State(s)/Jurisdiction(s) of Architecture License(s) & License Number(s):

Is all of the information the applicant provided on page 1 correct? Yes No

If no, please explain.

Please indicate, to the best of your knowledge, the applicant's ability in the experiences indicated above by placing an "X" in the appropriate box. If "Unsatisfactory" box is checked, please submit a letter of explanation with this form.

Excellent Satisfactory Marginal Unsatisfactory Not Qualified to Answer

Technical Competence

Professional Integrity

Signed _____

Date _____