



CANNON BUILDING
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STATE OF DELAWARE
BOARD OF LANDSCAPE ARCHITECTURE

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LANDSCAPE ARCHITECT SUPERVISORY REFERENCE FORM

The purpose of the form is to document the professional experience in Landscape Architecture of the applicant named below while under the direct supervision of a licensed Landscape Architect (24 Del. C. § 206).

- An applicant who has a degree in Landscape Architecture from an accredited school or college is required to have two years' experience.
- An applicant who does **not** have a degree in Landscape Architecture but who has completed two years of Landscape Architecture courses at an accredited school or college is required to have four years' experience.

Additional forms are available at www.dpr.delaware.gov – click on *Landscape Architecture* and then *Forms*.

1. Applicant's Application ID: _____
2. Applicant Name: _____
3. Name of Supervising Landscape Architect: _____
4. Supervisor's License Number: _____ State: _____
5. Licensed Supervisor's Business Name (if applicable): _____
6. Business Address: _____

7. Phone: _____ City: _____ State: _____ Zip: _____
Email: _____

7. Enter the time periods during which the applicant worked under your licensed **direct supervision**:

FROM (month/year)	TO (month/year)	HOURS
TOTAL HOURS YOU SUPERVISED APPLICANT		

8. Enter the following information about the titles and licenses you held while you directly supervising the applicant.
Title: _____ License Number: _____
Type of License: _____ Date Received: _____

I attest that I directly supervised the applicant named above and that the information I have provided here provided herein is accurate and complete to the best of my knowledge and belief.

SIGNATURE: _____ **Date:** _____



MAIL THIS FORM DIRECTLY TO THE DELAWARE BOARD OFFICE