

Wisconsin Department of Safety and Professional Services

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 Madison, WI 53705
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LicensE Portal: <https://license.wi.gov/>
 Email: dspd@wisconsin.gov
 Website: <http://dspd.wi.gov>

EXAMINING BOARD OF ARCHITECTS, LANDSCAPE ARCHITECTS, PROFESSIONAL ENGINEERS, DESIGNERS, PROFESSIONAL LAND SURVEYORS, AND REGISTERED INTERIOR DESIGNERS

LANDSCAPE ARCHITECT APPLICANT APPRAISAL FORM

Applicant's Name:			
Date of Birth:	<input type="text"/> / <input type="text"/> / <input type="text"/>	Application Number:	PAR-
Note to Applicant: Provide replies from five (5) references having personal knowledge of your experience, one of whom is a registered Landscape Architect. Family members can act as supplemental references in support of an application, but not as one of the five (5) required responses. Print your name in the box above prior to distribution. The individual providing the appraisal must upload completed form into LicensE.			
ATTESTATION OF APPLICANT: I declare that I am the person referred to on this form and that all information required to be completed by me (the applicant for a credential), is complete and accurate to the best of my knowledge and belief. Furthermore, I declare that after completing the information that was required by me (and only that information) the form was forwarded to the relevant third-party for completion of the information asked of them. I also declare that to the best of my knowledge the completed form was provided to the Department of Safety and Professional Services by the relevant third-party (and not by me, the applicant). Finally, I declare that I understand that failure to provide the requested information, making any materially false statement and/or giving any materially false information in connection with my application for a credential may result in credential application processing delays; denial, revocation, suspension, or limitation of my credential; or any combination thereof; or such other penalties as may be provided by law. By signing below, I am signifying that I have read and understand the above declarations.			
Applicant Signature (If unable to provide a digital signature, please print and sign form.)			Date
			<input type="text"/> / <input type="text"/> / <input type="text"/>

Instructions for Individual Providing Appraisal: The applicant named above has applied for registration as a Landscape Architect to practice in the State of Wisconsin. To assist the Board in reviewing the applicant, we would appreciate your appraisal of the applicant's proficiency as requested below. Complete this section for the above-named applicant and return directly to the Department using the LicensE Third-Party* Upload Portal at license.wi.gov . You will need the application number shown above. (*For form completion purposes, the term "Third-Party" refers to any non-applicant or non-DSPS individual or entity submitting required documentation in support of a credential application.)	
1. I know this applicant: <input type="checkbox"/> Very Well <input type="checkbox"/> Well <input type="checkbox"/> Slightly <input type="checkbox"/> Not at all	
2. My contacts with the applicant extend:	From: <input type="text"/> / <input type="text"/> / <input type="text"/> To: <input type="text"/> / <input type="text"/> / <input type="text"/>
3. These contacts were: (check all that apply)	
<input type="checkbox"/> As an associate	<input type="checkbox"/> As a student in my classes
<input type="checkbox"/> As a supervisor	<input type="checkbox"/> As a supervisor
<input type="checkbox"/> In social or community affairs	<input type="checkbox"/> In professional societal activities
<input type="checkbox"/> Other (specify) _____	
4. I am familiar with the applicant's work at: (name of company)	
5. Describe the principal duties performed by the applicant:	
6. Registration in Wisconsin is not by classification of any branch of landscape architectural practice. To assist the Board in evaluating this applicant, please check one or more of the listed categories in which you have knowledge of the applicant experience.	
<input type="checkbox"/> Design/Build Practice	<input type="checkbox"/> Private Practice
<input type="checkbox"/> Public Practice	
7. Provide any information or knowledge that you have of this applicant that would assist the Board in determining the applicant's competency to practice in the field of landscape architecture. (Attach additional sheets if necessary.)	

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To qualify for registration, an applicant must have sufficient knowledge and experience. To assist the Board in evaluating this applicant, please indicate whether the applicant has entry level competence in each of the practice areas by placing an "X" in one of the three boxes, i.e., Yes, No, or UK (unknown).

	Yes	No	UK	<u>Required Areas of Experience</u>
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Developing project criteria
9.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scheduling of a design program
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Developing a project
11.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conducting site analysis, gathering, and reviewing data
12.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Studying and documenting of environmental factors and impacts
13.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Producing site analysis of existing physical, psycho-social, human, economic and regulatory conditions
14.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Preparing project feasibility studies based upon analysis data
15.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Preparing required public submittals for approval
				<u>Design Development Including:</u>
16.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Code compliance
17.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grading plans
18.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Irrigation requirements
19.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Planting lists
20.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site layout
				<u>Preparation of contract documents including:</u>
21.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Calculations required by local regulatory bodies
22.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Demolition plans
23.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drainage plans
24.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grading plans
25.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Irrigation plans
26.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lighting plans
27.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Planting plans
28.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Preservation plans
29.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Project coordination with other project design professionals
30.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Project manual preparation
31.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site layout plans
32.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Soil test analysis
33.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tree removal
34.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Construction administration including:
35.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Obtaining client and regulatory approvals
36.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cost estimates
37.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site visits
38.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Field questions and issues
39.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Verifying contractor billings
40.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Issuing change orders
41.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Creating punch lists
42.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Final walk-throughs to verify design implementation
43.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post construction evaluation visits
44.	In my opinion, this applicant is qualified to hold a certification as a Landscape Architect. <input type="checkbox"/> Yes <input type="checkbox"/> No			

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