

11. Have you ever been subject to a disciplinary action taken by any (including Virginia) local, state or national regulatory body?
 No
 Yes If yes, complete the [Disciplinary Action Reporting Form](#).
12. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any felony?
 No
 Yes If yes, complete the [Criminal Conviction Reporting Form](#).
- B. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of a misdemeanor in the last 10 years? *Any plea of nolo contendere shall be considered a conviction.*
 No
 Yes If yes, complete the [Criminal Conviction Reporting Form](#).
13. By signing this application, I certify the following statements:
- I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
 - I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
 - I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
 - I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
 - I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 4 of the *Code of Virginia* and the *Virginia Board for Architects, Professional Engineers, Land Surveyors, Certified Interior Designers and Landscape Architects Regulations*.

Signature _____ Date _____

Required Attachment:

- ♦ Copies of certificate(s) showing successful completion of 16 hours of CE requirements set forth in Regulations 18VAC10-20-683.