

# INSTRUCTION SHEET

## ARCHITECTURE - Examination

### NOTICE

Any applicant with a pre-professional degree who passed a division of the Architect Registration Examination (ARE) in another jurisdiction that does not participate in the NCARB Direct Registration Program will be required to have completed IDP through NCARB and an IDP record prepared prior to being eligible to take the ARE through Continental Testing Services Inc. (CTS). **USE THIS FORM.**

Any applicants with a NAAB accredited professional degree who passed a division of the Architect Registration Examination (ARE) in another jurisdiction in the NCARB Direct Registration Program will be required to provide proof of concurrent entry into the IDP prior to being eligible to take the ARE through Continental Testing Services, Inc. (CTS). **USE THIS FORM.**

**Note:** Any applicant with a pre-professional degree who was approved to take the ARE for the first time after 1998 in another jurisdiction prior to completing the IDP is not eligible to apply for testing in Illinois. **DO NOT USE THIS FORM.**

Applicants who have never taken any division of the ARE should contact the NCARB for eligibility to take the ARE. **DO NOT USE THIS FORM.**

All applicants with a NAAB accredited degree who are concurrently entered in the NCARB IDP program after July 22, 2009, will be notified by NCARB of their eligibility to take the ARE. Once the ARE has been passed, and the IDP requirements have been satisfied, these applicants will apply to IDFPR for licensure on the basis of Acceptance of Examination.

All applicants with a pre-professional degree who have completed the NCARB IDP after September 1, 2002, will be notified by NCARB of their eligibility to take the ARE. Once the ARE has been passed, these applicants will apply to IDFPR for licensure on the basis of Acceptance of Examination.

Applicants with a pre-professional degree who have taken, but not passed, all divisions of the ARE in Illinois, and whose application has expired, will be required to have completed IDP through NCARB and an IDP Record prepared prior to being eligible to complete the ARE examination through Continental Testing Services, Inc. (CTS) should use this application.

**Before completing the application package**, read and then follow the directions as they apply to you. This will aid you in accurately completing your application and thus, eliminate any delay in processing. **The application which you submit is valid for 3 years from date of receipt.** If you are issued a license, please be advised your license will expire on November 30 of each even-numbered year.

### 4-Page Application

Complete the four-page Application for Licensure/Examination as follows:

1. Part I-A, Application Category Information--Select method of application and complete Part I as indicated below:

1. Profession Name	2. Profession Code	3. Licensure Method	4. Fee
Architect	001	Examination	*

\*See attached Reference Sheet for fee amount.

2. Part I-B--Check the box indicating the appropriate information regarding your application.
3. Part II, Applicant Identifying Information--Enter all applicable information requested. You **must** include your social security number in Box 3.

**Applicants who have taken but not passed all divisions of the ARE in Illinois and whose application has expired should use this application.**

**All other applicants contact NCARB at 202/783-6500 or visit their Web site at [www.ncarb.org](http://www.ncarb.org).**

Additional application forms can be downloaded from the IDFPR Web site at [www.idfpr.com](http://www.idfpr.com).

**4-Page Application**  
(cont'd)

Send Examination Application  
and Supporting Documents to:

**Continental Testing  
Services, Inc.  
P.O. Box 100  
LaGrange, IL 60525-0100**

Please allow 3 weeks from  
mailing your application before  
making an inquiry concerning its  
status.

4. Part III, Education Information:
  - a. Numbers 1 through 5--Enter all applicable information requested.
  - b. Number 6--Indicate all post-secondary education which you have attended since graduation from high school. Please indicate beginning and ending dates by year.
  - c. Number 7--Indicate all post-graduate professional training.
5. Part IV, Record of Licensure Information--Indicate in this area whether or not you have ever held a license as an Architect or a related license. Supporting document **CT-ARC** must also be completed by the jurisdiction of original licensure and the jurisdiction where you predominately practice.
6. Part V, Record of Examination--Indicate in this area if you have ever written the Architect Registration Examination or other licensing examination in Illinois or any other jurisdiction.
7. Part VI, Personal History Instructions--**Must** be completed by all applicants.
8. Part VII, Examination Coding Information--**DO NOT COMPLETE PART VII.**
9. Part VIII, Child Support Information--**Must** be completed by all applicants.
10. Part IX, Certifying Statement--Read the certifying statement and then sign and date your application.

***In order for your application to be processed,  
ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED  
with the application and required fee unless otherwise directed in the instructions.***

**Need Assistance**

If assistance is needed, direct your request to the following telephone number:  
217/782-8556.

Telecommunicative Device for the Deaf (TDD) - 217/524-6735.

When an operator answers, state the profession for which you are applying and that you need assistance with your application. Please allow 3 weeks from mailing your application before making an inquiry concerning its status.

**EXAMINATION**

**Experience/Education  
Qualifications for ARE**

**Effective January 1, 2014, only  
graduates with a first  
professional degree in  
architecture from a program  
accredited by the National  
Architectural Accrediting  
Board may take the  
examination for licensure.**

To be eligible to take the Architect Registration Examinations under Illinois law, applicants shall satisfy the education and diversification professional training (IDP) requirements as delineated in Section 1150.10(b) of the Rules for the Administration of the Illinois Architecture Practice Act of 1989. You must have met one of the following requirements:

1. a 6-year professional degree in architecture from a program accredited by the National Architectural Accrediting Board (NAAB), plus proof of entry in the NCARB IDP program;
2. a 5-year professional degree in architecture from a program accredited by NAAB, plus proof of entry in the NCARB IDP program;

**Experience/Education  
Qualifications for ARE (cont'd)**

3. a pre-professional 4-year baccalaureate degree in architecture from a program acceptable for direct entry into a professional master of architecture degree, plus 1,170 training units or 9,370 training hours as set forth in the NCARB IDP Guidelines will be accepted until December 31, 2013. After January 1, 2014, Illinois will only accept NAAB accredited Professional Degrees for licensure, regardless of where you are in the IDP/ARE process.

**"5-Year Rolling Clock"**

Illinois has accepted the NCARB "5-year Rolling Clock". As of January 1, 2006, an applicant must complete all divisions of the ARE within 5 years, or the earliest passed division will be voided and be required to be retaken. Exams passed prior to January 1, 2006 will be valid with no expiration.

**A.R.E.**

Effective July 1, 2009, only the ARE 4.0 will be administered. Any tests passed under previous versions of the ARE will be converted into the ARE 4.0. All Divisions of the ARE 4.0 must be completed, either by previous exams that are considered to have completed that Division of the ARE, or completion of all ARE 4.0 exams. Passage of a previous exam under 3.1 that does not fulfill the requirements of 4.0 will require that 4.0 exam to be taken.

For determination of which exams previously completed will transfer to the ARE 4.0, please review the transition charts of 3.1 to 4.0 on the NCARB website.

The ARE 4.0 does not represent a change in the content of the examination, only a reorganization of the content into different exams.

For further explanation of the transition, please access the information currently posted on the NCARB website ([www.ncarb.org](http://www.ncarb.org)).

**Examination  
Application Requirements**

**Note to Foreign-educated applicants:** Pursuant to Section 1150.10(a)(2)(B) of the Rules for the Administration of the Illinois Architecture Practice Act of 1989, all foreign-educated applicants must submit an EESA-NCARB Evaluation Report prepared by the Education Evaluation Services for Architects (EESA) which is administered by NAAB. You may request the evaluation report from the National Architectural Accrediting Board, 1735 New York Avenue, N.W., 3rd Floor, Washington, D.C., 20006, phone 202/783-2007 or [www.naab.org](http://www.naab.org).

***In order for your application to be processed,  
ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED  
with the application and required fee unless otherwise directed in the instructions.***

To apply to take the examination, submit the documents listed below:

1. Properly complete the 4-page Application for Licensure/Examination (see pages 1-2);
2. A signed and dated Affidavit attesting you have read and understand the Illinois Architecture Practice Act and Administrative Rules;

3. NCARB IDP--

i) Professional Degree: After July 22, 2009, you must provide proof of entry into NCARB IDP with proof of NAAB accredited degree.

ii) Pre-Professional Degree: You must request NCARB to transmit, at your expense, your completed IDP record to Continental Testing Services, Inc., P.O. Box 100, LaGrange, Illinois 60425-0100.

4. If you have taken and passed any division of the ARE in another jurisdiction, you must request that jurisdiction to complete Supporting Document **CT-ARC**. The licensing agency/board must return the completed document to you in a sealed envelope to be submitted with your application.

5. If you are a **foreign-educated** applicant who graduated from an architectural program outside the United States or its territories and whose first language is not English, you must submit proof of completion of the Test of English as a Foreign Language Internet Based Test (TOEFL-iBT) with a minimum score of 26 on the speaking module and a total minimum integrated score of 88, or the Test of English as a Foreign Language (TOEFL) with a minimum score of 550 or 213 for the computer-based test, and the Test of Spoken English (TSE) with a minimum score of 50. In order to determine countries whose first language is English, the applicant shall submit an official verification that English is the only national language, or verification that the architectural program is taught in English.

Include proof of passage of the TOEFL-iBT or the TOEFL and TSE examinations with your application to Continental Testing.

To obtain information about TOEFL-iBT and TOEFL and TSE testing, contact TOEFL Services, P.O. Box 6151, Princeton, New Jersey 08541-6151, telephone number 609/771-7100; FAX 609/771-7500; and TTY 609/734-9364.

6. Fee in the form of a certified check or money order made payable to Continental Testing Services, Inc.

## REFERENCE SHEET ~ EXAMINATION

ALL FEES ARE NONREFUNDABLE

Department reserves the right to change fees if prevailing circumstances necessitate such action.

### CHART I - PROFESSION NAME, PROFESSION CODE, LICENSURE METHOD & APPLICATION PROCESSING FEE

This chart contains fee information for licensure by examination only. If you require the application fee for licensure by endorsement of a license issued in another jurisdiction, contact the Department.

<u>PROFESSION NAME</u>	<u>PROFESSION CODE</u>	<u>LICENSURE METHOD</u>	<u>APPLICATION FEE</u>
Architect	001	Examination	\$97.00

An application submitted to Continental Testing Services (CTS) without the application processing fee will be returned for submission with the appropriate fee. After successful completion of the examination, you will be notified of the licensure fee.

### CHART II - DIVISIONS, EXAMINATION FEES AND TIME LIMITS

The application for examination is a dual process. Complete the examination/licensure application and submit it, along with the examination test fee, to Continental Testing Service (CTS) where it will be screened for eligibility.

Access and complete the examination application:

- via the internet at [www.continentaltesting.net](http://www.continentaltesting.net) and pay the examination fee with a credit card (Visa or MasterCard).
- Once you are determined eligible, you will receive an Authorization to Test (ATT) requiring test fee payment specified below. Your ATT will contain the necessary information to schedule a test appointment of your choice (date, time, and location).

**NOTE:** The Test Fee is for the cost of the examination only and is not transferrable from one exam date to another.

**NOTE:** Specific examination ARE Study Guides may be accessed at [www.ncarb.org](http://www.ncarb.org).

Architect Registration Examination Fees are payable upon telephone reservations with Prometric.

<u>ARE 4.0 Divisions</u>	<u>Test Fee</u> <u>effective October 1, 2009</u>
A. Programming Planning & Practice	\$210.00
B. Site Planning & Design	\$210.00
C. Schematic Design	\$210.00
E/F. Structural Systems	\$210.00
G. Building Systems	\$210.00
H. Building Design & Construction Systems	\$210.00
I. Construction Documents & Services	\$210.00

# Illinois Department of Financial and Professional Regulation

## Division of Professional Regulation

### Application Checklist for Architect

*In order for your application to be processed,  
**ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED**  
 with the application and required fee unless otherwise directed in the instructions.*

Before you mail your application, check the following items to make sure your application is complete!

FOUR-PAGE APPLICATION REVIEW	COMPLETED
Application Fee	
Affidavit	
SUPPORTING DOCUMENTS	SUBMITTED
NCARB IDP Council Record, if licensed after August 9, 1998	
NCARB Certification Record <b>or</b> (education, employment and licensure as noted below)	
Proof of Education ( <b>ED-ARC</b> form, Official transcript, or <b>EESA-NCARB</b> Evaluation Report) from:	
Verification of Employment ( <b>VE-ARC</b> ) Form from:	
Certification of Licensure/Examination ( <b>CT-ARC</b> ) from <i>original</i> state of licensure and <i>current</i> state of licensure:	
TOEFL and TSE or TOEFL-iBT Examination Results	
Form <b>RS</b> , if applicable. ( <b>NOTE:</b> If restoring, verification of at least the last 2 years of engineering experience must be submitted on <b>VE-SEG</b> )	
Copy of <b>DD214</b> if restoring from active military service	

**All supporting documents *may not be required*. Please refer to application instructions for your specific method of licensure.**





**PART IV: Record of Licensure Information**

If you have ever been licensed to practice the profession for which you are now making application, or held a related license, complete the information requested below. If you have ever held a temporary, trainee or apprenticeship license, or a permit, it must be listed here also. In addition, the INSTRUCTION SHEET enclosed with this Application package may instruct you to have Certification(s) of Licensure in other state(s) prepared and submitted in support of your application (contact other state(s) regarding possible fee). You must also list all other licenses held in Illinois, however, certification of licensure from Illinois is not required. Failure to disclose all licenses held may result in denial of your application or other appropriate action.

STATE	PROFESSION NAME	LICENSE NUMBER	DATE OF ISSUANCE	LICENSE STATUS (Active, Lapsed, etc.)
State of Original Licensure				
State of Current Licensure where you most recently have been practicing.				
Other States of Licensure				

*(If additional space is needed, attach a separate sheet.)*

**PART V: Record of Examination**

If you have ever taken a licensure examination in Illinois or any other state for the profession for which you are now making application, you must complete the information requested below. EACH EXAMINATION ATTEMPT MUST BE SHOWN. Failure to disclose an examination attempt may result in the denial of your application or other appropriate action.

NAME OF EXAMINATION	STATE	MONTH/YEAR	EXAM RESULTS
			(Passed, Failed, Absent)

*(If additional space is needed, attach a separate sheet.)*

PART VI: Personal History Information (This part must be completed by all applicants)		YES	NO
1. Have you been convicted of any criminal offense in any state or in federal court (other than minor traffic violations)? <i>If yes, attach a certified copy of the court records regarding your conviction, the nature of the offense and date of discharge, if applicable, as well as a statement from the probation or parole office.</i>			
2. Have you been convicted of a felony?			
3. If yes, have you been issued a Certificate of Relief from Disabilities by the Prisoner Review Board? <i>If yes, attach a copy of the certificate.</i>			
4. Have you had or do you now have any disease or condition that interferes with your ability to perform the essential functions of your profession, including any disease or condition generally regarded as chronic by the medical community, i.e., (1) mental or emotional disease or condition; (2) alcohol or other substance abuse; (3) physical disease or condition, that presently interferes with your ability to practice your profession? <i>If yes, attach a detailed statement, including an explanation whether or not you are currently under treatment.</i>			
5. Have you been denied a professional license or permit, or privilege of taking an examination, or had a professional license or permit disciplined in any way by any licensing authority in Illinois or elsewhere? <i>If yes, attach a detailed explanation.</i>			
6. Have you ever been discharged other than honorably from the armed service or from a city, county, state or federal position? <i>If yes, attach a detailed explanation.</i>			

**PART VII: Examination Coding Information (This part is for examination applicants only)**

Refer to the REFERENCE SHEET enclosed with this application package and complete the following:

a) CHART II - Select examination(s) you desire and enter Test Codes. 







b) CHART III - Select the examination site you desire and enter Test Center Code: 

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c) CHART IV - Find your School of Graduation and enter school code: 

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d) Record the number of times you have taken this exam in Illinois or any other state: 

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**PART VIII: Child Support and/or Student Loan Information (Every applicant is required by law to respond to the following questions)**

1. In accordance with 5 Illinois Compiled Statutes 100/10-65(c), applications for renewal of a license or a new license shall include the applicant's Social Security number, and the licensee shall certify, under penalty of perjury, that he or she is not more than 30 days delinquent in complying with a child support order. **Failure to certify shall result in disciplinary action, and making a false statement may subject the licensee to contempt of court.**

Are you more than 30 days delinquent in complying with a child support order? Yes  No   
 (NOTE: If you are not subject to a child support order, answer "no.")

2. In accordance with 20 Illinois Compiled Statutes 2105/2105-(5), "The Department shall deny any license or renewal authorized by the Civil Administrative Code of Illinois to any person who has defaulted on an educational loan or scholarship provided by or guaranteed by the Illinois Student Assistance Commission or any governmental agency of this State; however, the Department may issue a license or renewal if the aforementioned persons have established a satisfactory repayment record as determined by the Illinois Student Assistance Commission or other appropriate governmental agency of this State." (Proof of a satisfactory repayment record must be submitted.)

Are you in default on an educational loan or scholarship provided/guaranteed by the Illinois Student Assistance Commission or other governmental agency of this State? Yes  No

**PART IX: Certifying Statement**

Under penalties of perjury, I declare that I have examined the application and all supporting documents submitted by me in connection therewith, and to the best of my knowledge, they are true, correct, and complete.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

**I UNDERSTAND THAT FEES ARE NOT REFUNDABLE.** My signature above authorizes the Department of Financial and Professional Regulation to reduce the amount of this check if the amount submitted is not correct. I understand this will be done only if the amount submitted is greater than the required fee hereunder, but in no event shall such reduction be made in an amount greater than \$50.



**PART IV. - CERTIFICATION OF EXAMINATION SCORES**

EXAMINATION SYLLABUS (After January, 1954)	MINIMUM PASSING SCORE	HOURS	GRADE	DATE PASSED
A. Education & Experience / B. Personal Audience				
C. History & Theory of Architecture				
D. Site Planning				
E. Architectural Design				
F. Building Construction				
G. Structural Design				
H. Professional Administration				
I. Building Equipment				

EQUIVALENCY EXAMINATION (1973-77)	HOURS	GRADE	DATE PASSED
I. Architectural			
II. Construction Theory & Practice			
III. Architectural Design/Site Planning			

QUALIFYING TEST (Beginning 1977)	HOURS	GRADE	DATE PASSED
A. Architectural History			
B. Structural Technology			
C. Materials & Methods of Construction			
D. Environmental Control System			
E. Principals of Site Planning & Architectural Design (Thru 1978 only)			
F. Design/Site Planning (Thru 1978 only)			

PROFESSIONAL EXAMINATION-SECTION A (Beginning 1979)	GRADE	DATE PASSED
DESIGN/SITE TEST		

PROFESSIONAL EXAMINATION-(Beginning 1973-SECTION B) (Beginning 1979)	GRADE	DATE PASSED
PART I - Environmental Analysis		
PART II - Architectural Programming		
PART III - Design and Technology		
PART IV - Construction		

ARCHITECTURAL REGISTRATION EXAMINATION (ARE)	GRADE	DATE PASSED
(1983-1987)		
(1988-1996)		
(1997-2009)		
ARE 4.0 (2008-)		

(1983-1987)	GRADE	DATE PASSED	(1988-1996)	GRADE	DATE PASSED	(1997-2009)	GRADE	DATE PASSED	ARE 4.0 (2008-)	GRADE	DATE PASSED
A-Pre-Design			A-Pre-Design			PD			Program Planning and Practice		
B-Site Design			B-Site Design/Written			SP					
			B-Site Design/Graphic						Site Planning and Design		
C-Building Design			C-Building Design			BP			Building Design & Construction Systems		
D-General Structure						BT					
E-Lateral Forces			D/F-General & Long Span			GS			Schematic Design		
F-Long Span Structure			E-Lateral Forces			LF			Structural Systems		
G-Mech/Electrical			G-Mechanical/Electrical			ME			Building Systems		
H-Materials/Methods			H-Materials/Methods			MM			Construction Documents & Services		
I-Construction Documents			I-Construction Documents			CD					

Have any NCARB examination grades been modified by this state under a review or appeal process?  Yes  No

If Yes, which divisions? \_\_\_\_\_

I certify that the information contained herein is true and correct according to the official records of this State.

\_\_\_\_\_  
 Print Name  
 S E A L \_\_\_\_\_  
 Title

\_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Date

**RETURN THIS FORM TO APPLICANT IN A SEALED ENVELOPE TO BE SUBMITTED WITH APPLICATION.**

NAME (Last, First, MI):

SS#:

Profession: