LOUISIANA DEPARTMENT of AGRICULTURE & FORESTRY
MIKE STRAIN, DVM *Commissioner*

HORTICULTURE COMMISIONSION
5825 Florida Blvd., Suite 1003
Baton Rouge, LA 70806
(225) 952-8100; FAX (225) 925-3760

LOUISIANA LANDSCAPE ARCHITECT EXAMINATION

SECTION 1

Name :_____

Phone:_____ Business Phone:_____

Mailing Address:_____

City:_____ State:_____ Zip Code:_____

Email Address:_____

Date of Birth:_____ Social Security Number (Last 4 Digits Only):_____

EXAM TYPE

Choose One:

☐ Louisiana Landscape Architect Examination Fee $200.00 ☐ Retake Fee $100.00

EXAM SITE

Choose One:

☐ Online* ☐ Baton Rouge LDAF Main Office (In-person)

*Everblue Testing systems will charge an additional fee to access each exam online. An email is required above for exam setup and payment.

Note: You have sixty (60) days from the time of application in which to take exam or your exam fee will be forfeited. Make check or money order payable to Louisiana Horticulture Commission.

1. Applicants without a CLARB record must complete the entire application and provide any necessary information requested along with the application, signed, dated and notarized, with the appropriate fees.
2. Applicants licensed in another state will need to have the state of initial licensure send a certified copy of your CLARB scores, along with proof of current license status; or, have your CLARB council record transmitted to us from CLARB.
3. Retake applicants need to complete Section 1 only, sign and date below and return this sheet with the appropriate fees.
4. You may omit Sections 3 and 4 if you have CLARB certification or a council record and the information regarding education and experience is contained in that record. Please have your scores transmitted from CLARB with this application.

Signature:_____ Date:_____

OFFICE USE	
Transmittal #	
Check #	
Date	
Amt. $	.00

SECTION 2

Exam – All new applicants must complete this section:

Have you obtained a passing score on all parts of the CLARB National Examination (LARE) or an exam approved by CLARB for landscape architects? ☐ Yes ☐ No

Examination Passed: ☐ CLARB ☐ Other – Enter Exam Name:

Date Passed: _____

If you have passed all sections of the CLARB National Examination or a similar examination, arrange for the commission office to receive a certification or other evidence of your passing score. The jurisdiction where you took the exam may send verification *directly* to the commission office, or you may request an examination verification or CLARB council record from www.clarb.org.

SECTION 3

Enter the following information about your education:

College/University: _____ Major: _____
Dates Attended From: _____ To: _____
Degree: _____ Date Conferred: _____

College/University: _____ Major: _____
Dates Attended From: _____ To: _____
Degree: _____ Date Conferred: _____

College/University: _____ Major: _____
Dates Attended From: _____ To: _____
Degree: _____ Date Conferred: _____

College/University: _____ Major: _____
Dates Attended From: _____ To: _____
Degree: _____ Date Conferred: _____

Arrange for the commission office to receive an official transcript(s) directly from the college or university to the commission office.

SECTION 4

Experience: Start with the most recent position and work backwards. Attach additional sheets as needed.

Date From:______________________________ Date To:______________________________
State Nature, Character and Magnitude of Work:______________________________
Name of Supervisor:____________________ Title of Supervisor:____________________
License of Supervisor:____________________ Employed (Choose one): ☐ Full-time ☐ Part-time
Name of Employer:______________________________
Address of Employer:____________________ State:__________ Zip Code:____________________
Phone Number of Employer:______________________________

Date From:______________________________ Date To:______________________________
State Nature, Character and Magnitude of Work:______________________________
Name of Supervisor:____________________ Title of Supervisor:____________________
License of Supervisor:____________________ Employed (Choose one): ☐ Full-time ☐ Part-time
Name of Employer:______________________________
Address of Employer:____________________ State:__________ Zip Code:____________________
Phone Number of Employer:______________________________

Date From:______________________________ Date To:______________________________
State Nature, Character and Magnitude of Work:______________________________
Name of Supervisor:____________________ Title of Supervisor:____________________
License of Supervisor:____________________ Employed (Choose one): ☐ Full-time ☐ Part-time
Name of Employer:______________________________
Address of Employer:____________________ State:__________ Zip Code:____________________
Phone Number of Employer:______________________________

AFFIDAVIT

State of ______________________________ county or parish of ______________________________

on this________ day of_______________ ,_________, before me personally appeared____________________

known to me to be the person herein described, and as having signed this application, and on oath affirms that all the statements herein made are true.

Notary Public:______________________________ Signature of Applicant:______________________________

Seal:

LOUISIANA DEPARTMENT of AGRICULTURE & FORESTRY
MIKE STRAIN, DVM
Commissioner

everblue

Technology Requirements for Online Testing

- Use a traditional desktop or laptop. You cannot take the exams from mobile devices (e.g., Chromebook, iPhone, iPad, Android device, etc.).
- Check to be sure your computer operating software is up to date. Your operating system must be updated and at a minimum: Windows 10+ or macOS 11+.
- You will need to have Internet Speed Upload: 1 Mbps and Download: 2 Mbps. Tethering and Hotspots are not suggested.
- You need a working webcam and microphone.
- You can only use ONE monitor; dual monitors are not allowed.
- You will need administrative rights to your computer to download and install the proctoring tool.
- Use an updated version of Google Chrome, Edge, Firefox or Safari.

LDAF Rules for testing: Title 7 Part XXIX

§ 105. A. 1. An applicant must be 17 years of age or older to take an examination for licensure or apply for a permit but must be 18 years of age or older before a license or permit will be issued to the applicant.

§ 111. A. Any person taking an examination for licensure must score a 70 percent or above to pass the examination

B. An applicant who fails to complete or pass an examination for licensure must wait at least **seven days** before reapplying to take the examination.

C. A passing score on an examination is valid for five years, after which time the applicant must apply to retake the examination.

§113. B. An applicant shall be disqualified from completing an examination or taking any other examination administered under these rules and regulations if the applicant is caught or found to be cheating on an examination.

C. Any applicant caught or found to be cheating shall not be allowed to finish the examination and shall receive a score of zero. If an applicant finished the examination prior to the discovery of the cheating the applicant's examination shall be voided and the applicant shall receive a score of zero.

F. If the action or administrative decision is not appealed or is upheld on appeal then the applicant shall not be allowed to take or re-take the examination or any other examination administered under these rules and regulations **for a period of three years** from the examination date without the approval of the commission given at a meeting of the commission.