STATE OF UTAH
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING
LANDSCAPE ARCHITECT EXAMINATION
CANDIDATE INFORMATION BULLETIN

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Please refer to our website to check for the most updated information at www.psiexams.com

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Last Revised 5/23/2012
EXAMINATIONS BY PSI

This Candidate Information Bulletin provides you with information about the examination process for Landscape Architectural Licensure in the State of Utah.

The Division has contracted with PSI licensure:certification (PSI) to assist with the examination process.

All questions and requests for information about examinations should be directed to PSI.

PSI licensure:certification
3210 E Tropicana
Las Vegas, NV  89121
(800) 733-9267 • Fax (702) 932-2666
www.psiexams.com

Upon completion of all licensure requirements, including passing the appropriate examination, submit a completed application for licensure to DOPL at the address below. Applications for licensure are available online at www.dopl.utah.gov.

Division of Occupational and Professional Licensing
P.O. Box 146741
Salt Lake City, Utah 84114-6741
(801) 530-6628

EXAMINATION REGISTRATION AND SCHEDULING PROCEDURES

You must complete and submit the Examination Registration Form, Score Retention Form, and fees found at the end of this Candidate Information Bulletin. These forms must be received before the deadline date.

Landscape Architect Registration Examination (LARE) Sections C and E.

<table>
<thead>
<tr>
<th>Section C Test Date</th>
<th>Section E Test Date</th>
<th>Registration Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 11, 2012</td>
<td>June 12, 2012</td>
<td>April 16, 2012</td>
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</table>

Sections A, B and D. To register for Sections A, B, and D of the LARE, refer to the CLARB’s Web site at www.clarb.org.

Once you have registered, you will receive a notification with your candidate I.D.

The following fee table lists the applicable fee for each examination. The fee is for each examination, whether you are taking the examination for the first time or repeating.

<table>
<thead>
<tr>
<th>EXAMINATION FEE</th>
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<tbody>
<tr>
<td>Registration Fee</td>
</tr>
<tr>
<td>Section C</td>
</tr>
<tr>
<td>Section E</td>
</tr>
<tr>
<td>Score Retention Fee*</td>
</tr>
<tr>
<td>Total Fee</td>
</tr>
</tbody>
</table>

*The score retention fee is a one-time fee to be paid by every candidate.

NOTE: REGISTRATION FEES ARE NOT REFUNDABLE OR TRANSFERABLE.

STANDARD MAIL REGISTRATION

1. Complete the Examination Registration Form found in this Candidate Information Bulletin. BE SURE TO READ ALL DIRECTIONS CAREFULLY BEFORE COMPLETING THE EXAMINATION REGISTRATION FORM. IMPROPERLY COMPLETED FORMS WILL BE RETURNED TO YOU UNPROCESSED.

2. Fees may be paid by credit card (VISA, MasterCard, American Express or Discover), company check or cashier’s check. Make check or money order payable to PSI and print your social security number on it to ensure that your fees are properly assigned. CASH and PERSONAL CHECKS ARE NOT ACCEPTED.

3. Return the completed original form to PSI with the appropriate examination fee.

4. Please allow 2 weeks to process your Registration before scheduling your examination.

FAX REGISTRATION

For fax registration, you will need a valid credit card (VISA, MasterCard, American Express or Discover).

1. Complete and fax the Examination Registration Form and Score Retention Form found at the end of this Candidate Information Bulletin. These forms must be received before the deadline date.

2. Fax the completed form to PSI (702) 932-2666. Fax registrations are accepted 24 hours a day.

Registered candidates will receive a PSI Confirmation Notice prior to the examination date.

SPECIAL EXAMINATION ARRANGEMENTS

All examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990, and every reasonable accommodation will be made in meeting a candidate’s needs. Applicants with disabilities or those who would otherwise have difficulty taking the examination must fill out the form at the end of this Candidate Information Bulletin and fax to PSI (702) 932-2666. This form also includes out-of-state testing requests.
EXAMINATION SITE CLOSING FOR AN EMERGENCY

In the event that severe weather or another emergency forces the closure of an examination site on a scheduled examination date, your examination will be rescheduled. PSI personnel will attempt to contact you in this situation. However, you may check the status of your examination schedule by calling (800) 733-9267. Every effort will be made to reschedule your examination at a convenient time as soon as possible. You may also check our website at www.psiexams.com.

EXAMINATION SITE LOCATION

The following test centers are located in Utah.

Note: The following directions are generated from the most current mapping services available. However, new road construction and highway modifications may result in some discrepancies. If you are not familiar with the specific area of the testing site, please consult a reliable map prior to your test date.

North Salt Lake City
25 North 400 West, Suite 7
North Salt Lake City, UT 84054

(The city of North Salt Lake not Salt Lake City proper. The PSI test site is in Davis County just north of the Flying J Refinery.)

From Salt Lake City and the South.
Merge on to I-15N. Take exit 312 and merge on to US89 North for about 1.8 miles. Turn left onto E Center St and go west for about .6 miles. Turn right on to 400 W.

From the North
Merge onto I-15 S Salt Lake. Take the Center St., exit 314. Turn right onto W Center St. Turn right onto 400 W.

From I-80 East merge to I-215 North. Take the Redwood Rd/UT-68 exit 28 and turn right onto Center Street. PSI is on the Northwest corner of 400 West and Center Street.

REPORTING TO THE EXAMINATION SITE

On the day of the examination, you should arrive at least 30 minutes before your appointment. This extra time is for sign-in, and identification. If you arrive late, you may not be admitted to the examination site and you will forfeit your examination registration fee.

REQUIRED IDENTIFICATION AT EXAMINATION SITE

You must provide 2 forms of identification. One must be a valid form of government issued identification (driver’s license, state ID, passport, military ID), which bears your signature and has your photograph. The second ID must have your signature and preprinted legal name.

If you cannot provide the required identification, you must call (800) 733-9267 at least 3 weeks prior to your scheduled appointment to arrange a way to meet this security requirement. Failure to provide all of the required identification at the time of the examination without notifying PSI is considered a missed appointment, and you will not be able to take the examination.

SECURITY PROCEDURES

The following security procedures will apply during the examination:

- Cell phones, pagers, and children are not allowed in the examination site.
- Only non-programmable calculators that are silent, battery-operated, do not have paper tape printing capabilities, and do not have a keyboard containing the alphabet will be allowed in the examination site.
- No smoking, eating, or drinking will be allowed in the examination site.
- Copying or communicating examination content is a violation of PSI security policy. Either one may result in the disqualification of examination results and may lead to legal action.

SCORE REPORTING

A score report will be mailed to you approximately 10 weeks after the examination date.

Score reports will provide you with the next step in the licensure process. To ensure confidentiality, scores will not be given over the phone. Scores are reported pass or fail.

RETAKE INFORMATION

To retake Section C and E of the examination, you must submit another Examination Registration Form and the appropriate fee to PSI. Retake fees are the same as original fees.

TIPS FOR PREPARING FOR YOUR LICENSE EXAMINATION

The LARE tests applicants for the knowledge and skill that is required to practice those aspects of landscape architecture that impact the health, safety and welfare of the public. The examination is based on a scientific “Job Analysis” study conducted in 2005 in which practicing landscape architects were asked to rate a series of tasks, knowledge areas and competencies needed to provide landscape architectural services.

The LARE consists of five test sections. Each section is independent of the others. Sections A, B and D are multiple-choice sections that are administered on computer. Sections C and E consist of 11”x17” vignette problems that require a drafted solution.

The following suggestions will help you prepare for your examination.

- Planned preparation increases your likelihood of passing.
Start with a current copy of this Candidate Information Bulletin and use the examination content outline as the basis of your study.

- Read study materials that cover all the topics in the content outline.
- Take notes on what you study. Putting information in writing helps you commit it to memory and it is also an excellent business practice. Discuss new terms or concepts as frequently as you can with colleagues. This will test your understanding and reinforce ideas.
- Your studies will be most effective if you study frequently, for periods of about 45 to 60 minutes. Concentration tends to wander when you study for longer periods of time.

EXAMINATION CONTENT OUTLINE

Knowing what to expect when taking your exam may help you prepare for it. When taking the graphic response portions of the LARE, it is very important to budget your time as you will be asked to complete a set of vignette problems within a specific period of time. Each vignette is intended as a sketch problem.

Be sure to read the instructions carefully and completely before creating a solution. Your solution must respond to all of the requirements stated. You may use sketch paper to develop your solution before transferring it to the problem sheet; however, overlays will not be considered as part of your final solution.

Section C - Site Design. (4 vignette problems.) You will be tested on your ability to develop design, planning and management solutions considering on-site and off-site influences and convey the information through text and in drawings. You will be required to incorporate consultant studies into your design and predict the implications of your design, planning and management proposals on the natural and cultural systems both within the site and in the larger context.

You must be able to evaluate design alternatives to determine the appropriate solution and create design alternatives to demonstrate the range of options. You will also be expected to incorporate the design of circulation systems such as equestrian, bicycle, pedestrian and vehicular systems into your design solutions.

Section E - Grading, Drainage and Stormwater Management. (4 vignette problems.) You will be tested on your ability to develop grading and drainage plans considering on-site and off-site influences and convey the information in drawings. You must be able to manipulate contours to demonstrate your ability to convey water to meet design requirements while protecting land and water resources.

You will be expected to evaluate existing landforms and drainage systems to locate program elements minimizing environmental or economic impacts. You will also be required to think three-dimensionally to manipulate landforms to meet design requirements.

Study tools. CLARB produces study tools specifically designed to provide examination candidates with information about the LARE. For information on any of CLARB’s publications, please contact the council office.
Before you begin...  
Read the Candidate Information Bulletin before filling out this registration form. You must provide all information requested and submit the appropriate fee. PLEASE TYPE OR PRINT LEGIBLY. Registration forms that are incomplete, illegible, or not accompanied by the proper fee will be returned unprocessed. Registration fees are not refundable or transferable.

1. Legal Name: ____________________________________________  ____________________________________________  ____________________________________________
   Last Name  First Name  M.I.

2. Social Security: _______ - _______ - _______ (FOR IDENTIFICATION PURPOSES ONLY)

3. Mailing Address: ____________________________________________  ____________________________________________  ____________________________________________  ____________________________________________
   Number, Street  Apt/Ste
   City  State  Zip Code

4. Telephone:  Home _______ - _______  Office _______ - _______

5. Email: ____________________________________________ @ ____________________________________________

6. Examination: Please check the appropriate boxes of the examination(s) you are registering for and the examination date.

<table>
<thead>
<tr>
<th>Examination Title</th>
<th>Exam Fee</th>
<th>Total Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Registration Fee</td>
<td>$75</td>
<td>$</td>
</tr>
<tr>
<td>☐ Section C – Planning and Site Design</td>
<td>$325</td>
<td>$</td>
</tr>
<tr>
<td>☐ Section E – Grading, Drainage and Storm Water Management</td>
<td>$325</td>
<td>$</td>
</tr>
<tr>
<td>☐ Score Retention Fee*</td>
<td>$30</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total Fee</strong></td>
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<td>$</td>
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</table>

7. Payment: (MasterCard, VISA, Money Order or Cashier’s Check only. Personal and company checks are not accepted.)

Credit card (MasterCard or VISA) payment accepted for phone or fax registrations only. (Check One): ☐ MC ☐ VISA

Card No: ___________________________  Exp. Date: ___________________________

Card Verification No: ___________________________

For your security, PSI requires you to enter the card identification number located on your credit card. The card identification number is located on the back of the card and consists of the last three digits on the signature strip.

Cardholder Name (Print): ___________________________  Signature: ___________________________

8. I am faxing the Special Arrangement Request (at the end of this bulletin) and required documentation. ☐ Yes ☐ No

9. Affidavit: I certify that the information provided on this registration form (and/or telephonically to PSI) is correct. I understand that any falsification of information may result in denial of licensure. I have read and understand the examination information bulletin.

Signature: ___________________________  Date: ___________________________

Complete and forward this registration form with the applicable examination fee to:

PSI licensure:certification  * ATTN: Examination Registration UT LAND SUR7
3210 E Tropicana  * Las Vegas  * NV  * 89121
Fax (702) 932-2666  * (800) 733-9267  * TTY (800) 735-2929  * www.psiexams.com
In order for the Division of Occupational and Professional Licensing to record and retain your examination scores, you must complete the following application and submit the examination score retention fee of $30 to PSI.

<table>
<thead>
<tr>
<th>1. Legal Name:</th>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security:</td>
<td>-</td>
<td>-</td>
<td>(FOR IDENTIFICATION PURPOSES ONLY)</td>
</tr>
<tr>
<td>3. Mailing Address:</td>
<td>Number, Street</td>
<td>Apt/Ste</td>
<td>City</td>
</tr>
<tr>
<td>4. Telephone:</td>
<td>Home</td>
<td>-</td>
<td>Office</td>
</tr>
<tr>
<td>5. Date of Birth:</td>
<td>MM</td>
<td>DD</td>
<td>YEAR</td>
</tr>
</tbody>
</table>

Complete and forward this score retention form with the applicable fee to:
PSI licensure:certification * ATTN: Examination Registration UT LAND SUR7
3210 E Tropicana * Las Vegas * NV * 89121
Fax (702) 932-2666 * (800) 733-9267 * TTY (800) 735-2929 * www.psiexams.com
All examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990. Applicants with disabilities or those who would otherwise have difficulty taking the examination may request special examination arrangements.

Candidates who wish to request special arrangements because of a disability should fax this form and supporting documentation to PSI at (702) 932-2666.

Requirements for special arrangement requests

You are required to submit documentation from the medical authority or learning institution that rendered a diagnosis. Verification must be submitted to PSI on the letterhead stationary of the authority or specialist and include the following:

- Description of the disability and limitations related to testing
- Recommended accommodation/modification
- Name, title and telephone number of the medical authority or specialist
- Original signature of the medical authority or specialist

Date________________________________________________

Legal Name:_____________________________________________

Last Name                                                                      First Name

Address:____________________________________________________________________

Street                                                                 City, State, Zip Code

Telephone: (________) _______ - ___________    (________) _______ - ___________

Home                                                                       Work

Email Address:______________________________________________

Check any special arrangements you require (requests must concur with documentation submitted):

☐ Reader (as accommodation for visual impairment or learning disability)
☐ Extended Time (Additional time requested:___________)
☐ Large-Print written examination
☐ Other_____________________________________________________

Complete and fax this form, along with supporting documentation, to (702) 932-2666.
After 4 business days, please call (800) 367-1565, ext 6750 and leave a voice message.
PSI Special Accommodations will call you back to schedule the examination within 48 hours.

DO NOT SCHEDULE YOUR EXAMINATION UNTIL THIS DOCUMENTATION HAS BEEN RECEIVED AND PROCESSED BY PSI SPECIAL ACCOMMODATIONS.
PSI licensure: certification
3210 E Tropicana
Las Vegas, NV 89121