



CONNECT APPLICATION GUIDE

California Architects Board Eligibility Application

SCREEN

California Architects Board

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Connect Support

Link License

Licenses

License Type	License#	Issuance Date	Expiration Date
No records found.			

« < > »

Applications

New Application

Application Type	License Type	Application#	Submitted Date	Business Name	Status	Action
No applications found.						

Showing 0 to 0 of 0 entries « < > » 10 ▾

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Links & Resources

Name
California Architects Board

Notifications

Q Search Keyword

Subject	Date Sent
No records found.	

« < > »

ACTION

1. Locate CAB User Dashboard
2. Click the **'New Application'** button on the top right of the Applications pane

Applications

New Application

Application Type	License Type	Application#	Submitted Date	Business Name	Status	Action
No applications found.						

Showing 0 to 0 of 0 entries « < > » 10 ▾



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Eligibility Application

Application Type Selection

To start a new application, please select one from the list below.

Application

Application For Eligibility Evaluation

Application For Eligibility Evaluation

Application For California Supplemental Examination

Application For Licensure

Application Type Selection

To start a new application, please select one from the list below.

Application

Application For Eligibility Evaluation

Create Application

Cancel

3. Select the type of application that you wish to complete—in this case the **Application Eligibility Evaluation**.

4. With the Eligibility Application selected, click the green **'Create Application'** button.



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Eligibility Application

Application For Eligibility Evaluation	
<div>Instructions & Disclosures</div>	<div>Instructions & Disclosures</div> <p>Fee: \$100 (nonrefundable) must be paid using a valid debit/credit card. If submitting an application by mail please include a check or money order made payable to the California Architects Board and mail to the address below: CALIFORNIA ARCHITECTS BOARD 2420 Del Paso Road, Suite 105, Sacramento, CA 95834</p> <div>Save & Continue Save & Exit</div>
Personal Information	
General Questions	
Military Service Questions	
Refugee Status Question	
Disciplinary and Conviction Questions	
Education	
Experience	
Reasonable Accommodation	
Attestation	
Fee and Payment	

- 5. Here is what the online Eligibility Application for CAB looks like.
- 6. Review Instructions and Disclosures and click '**Save & Continue.**'



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Application For Eligibility Evaluation

Personal Information

SSN/ITIN: *
611-20-9144

Disclosure of your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) is mandatory. Business and Professions Code (BPC) sections 30 and 5550.5 and Public Law 94-455 (42 USCA 405(c)(2)(C)) authorize collection of your SSN or ITIN. Your SSN or ITIN will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with section 17520 of the Family Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN or ITIN, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.

NCARB Record Number
[Text Field]

First Name: * [Text Field] Middle Name: [Text Field] Last Name: * [Text Field] Suffix: [Text Field]

Other Known Name(s): [Text Field] DOB (Date of Birth): * [Text Field] Sex:
☒ Male
☐ Female
☐ Nonbinary

Address of Record (AOR): * [Text Field] Country: * [Dropdown] State: * [Dropdown] City: * [Dropdown]

Address of Record AOR Line 2: [Text Field] Zip: * [Text Field]

Email Address: * [Text Field]

Daytime Phone: [Text Field] Evening Phone: [Text Field]

Save & Continue **Save & Exit**

Instructions & Disclosures

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Application For Eligibility Evaluation

General Questions

General Questions

1. Have you previously applied for eligibility in California? If Yes, provide the date(s) of application *
☐ Yes
☐ No

2. Have you completed the NCARB Architectural Experience Program (AXP), which was formerly known as Intern Development Program (IDP)?
☐ Yes
☐ No

3. Have you completed the CACB Canadian Internship Architect Program (IAP)? *
☐ Yes
☐ No

4. Would you like your information (name and address) shared with other individuals or organizations offering to provide education information regarding the examination? *
☐ Yes
☐ No

Save & Continue **Save & Exit**

7. Complete all fields and click the green **'Save & Continue'** button.

*Note: All required fields have a red asterisk.

8. Complete all questions, add any explanations, and click the green **'Save & Continue'** button.



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9. Read the instructions and answer the questions. If you answer YES to the first question, upload any supporting documentation, and click the green 'Save & Continue' button.



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Personal Information ✓

General Questions ✓

Military Service Questions ✓

Refugee Status Question ✕

Disciplinary and Conviction Questions ✕

Education ✕

Experience ✕

Reasonable Accommodation ✕

Attestation ✕

Fee and Payment ✕

Application For Eligibility Evaluation

Refugee Status Question

Instructions

Business and Professions Code section 135.4 provides that the Board must expedite, and may assist, the initial licensure process for certain applicants described below.

If you selected Yes, you must attach evidence of your status as a refugee, asylee or special immigration visa holder. Failure to do so may result in application review delays.

Acceptable documentation includes the following:

- Form I-94 Arrival/Departure Record, with an admission class code such as "RE" (Refugee) or "AY" (Asylee) or other information designating the person a refugee or asylee.
- Special immigrant visa that includes the classification of "SI" or "SQ"
- Permanent Resident Card (Form I-551) commonly known as a "Green Card" with a category designation indicating that the person was admitted as a refugee or asylee.
- An order from a court of competent jurisdiction or other documentary evidence that provides reasonable assurance the applicant qualifies for the expedited licensure.

Refugee Status Question

Do any of the following statements apply to you:

☐ Yes
☐ No

- You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code.
- You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code; or
- You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

Save & Continue

Save & Exit

10. Read the instructions and answer the question. If you answer YES to the question, upload any supporting documentation, and click the green **'Save & Continue'** button.



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11. Answer the question. If you answer YES to the question, upload any supporting documentation, and click the green **'Save & Continue'** button



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Education

Education

Have you received a high school diploma or GED? *

☒ Yes
☐ No

College or University:

Course of Study:

Degree, Diploma or Certificate:

Date Conferred:

Save & Continue

Save & Exit

Instructions & Disclosures

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Experience

Instructions

The Board requires training (work) experience to be documented on the Employment Verification Form (EVF). All EVFs must contain the original signature of the employer. Copies, rubber stamps, or other reproductions of the signature will not be accepted. In addition, forms containing strikeouts or corrections will not be accepted.

https://cab.ca.gov/docs/forms/employment_verification_form.pdf

Do you want to report training (work) experience? *

☐ Yes
☒ No

Save & Continue

Save & Exit

12. Answer the question about education.
13. If you answer YES to the question, fill out any additional information, and click the green **'Save & Continue'** button.
14. Read the instructions and answer the question. If you answer YES to the question, upload any supporting documentation, and click the green **'Save & Continue'** button.



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15. If you answer 'YES' to any of the questions, complete an explanation, upload any supporting documentation needed, and click the green **'Save & Continue'** button.



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16. Read the instructions, and click the green **'Save & Continue'** button.



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<div><div>Instructions & Disclosures <input checked="" type="checkbox"/></div><div>Personal Information <input checked="" type="checkbox"/></div><div>General Questions <input checked="" type="checkbox"/></div><div>Military Service Questions <input checked="" type="checkbox"/></div><div>Refugee Status Question <input checked="" type="checkbox"/></div><div>Disciplinary and Conviction Questions <input checked="" type="checkbox"/></div><div>Education <input checked="" type="checkbox"/></div><div>Experience <input checked="" type="checkbox"/></div><div>Reasonable Accommodation <input checked="" type="checkbox"/></div><div>Attestation <input checked="" type="checkbox"/></div><div>Fee and Payment <input checked="" type="checkbox"/></div></div> <div><div>Attestation</div><div><div><input type="checkbox"/> I declare under penalty of perjury under the laws of the State of California that all my representations on this Application for Eligibility Evaluation (including attachments) are true, correct, and contain no material omissions of fact to the best of my knowledge and belief. *</div><div><div>Date *</div><div>03/02/2023</div><div>Signature *</div><div></div></div><div><div>Save & Continue</div><div>Save & Exit</div></div></div></div> <div><div>17. Check the box that you are certifying all information contained in the application is true and correct.</div><div>18. Type your name and click the green 'Save & Continue' button.</div></div>	
<div><div>Order Information</div><div>Total Fees <input type="text" value="317.13"/></div><div><input type="checkbox"/> Copy Details From Address of Record</div><div><div>Payment Information</div><div><div>VISA MasterCard DISCOVER</div><div>Card Number: * <input type="text"/></div><div>CVV: * <input type="text"/></div><div>Expiration Date: * <div>Month: * <input type="text" value="M..."/></div> Year: * <input type="text" value="Y..."/></div></div><div><div>First Name: * <input type="text"/></div><div>Last Name: * <input type="text"/></div><div>Street 1: * <input type="text"/></div><div>Street 2: <input type="text"/></div><div>Country: * <input type="text" value="UNITED STATES"/></div><div>State/Province: * <input type="text"/></div><div>City * <input type="text"/></div><div>Zip/Postal Code: * <input type="text"/></div></div><div><div>Pay and Submit</div></div></div></div> <div><div>19. Order information will populate.</div><div>20. Complete all payment information and click the blue 'Pay and Submit' button.</div><div>*Note: You can select 'Copy Details From Address of Record' which will populate the fields in the Billing Information based on information within the application, however; any of these fields may be updated as needed.</div></div>	