



CONNECT APPLICATION GUIDE

California Landscape Architects Technical Committee

CSE Application

SCREEN

DEPARTMENT OF CONSUMER AFFAIRS
CALIFORNIA ARCHITECTS BOARD
LANDSCAPE ARCHITECTS TECHNICAL COMMITTEE

Profile | Sign Out

Link License

Connect Support

Landscape Architects Technical Committee

Licenses

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

Links & Resources

Name
Landscape Architects Technical Committee

Applications

New Application

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

Showing 0 to 0 of 0 entries

Notifications

Search Keyword

Subject	Date Sent
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

ACTION

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



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Application Type Selection

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

Application

- Select -

Eligibility Application

California Supplemental Examination Application

Initial License Application

Application Type Selection

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

Application

California Supplemental Examination Application

Create Application

Cancel

3. Select the type of application that you wish to complete—in this case the **Application for California Supplemental Examination**.
4. With the CSE application selected, click the green **'Create Application'** button.



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Instructions and Disclosures

Personal Information

Special Consideration

Person History

Attestation

Fee and Payment

California Supplemental Examination Application

Instructions and Disclosures

Instructions

The following documentation must be received by the LATC prior to the application being reviewed:

1. California Supplemental Examination Application.
2. Application evaluation fee of \$35.00 is required and non-refundable.

California Supplemental Examination Fee of \$275 which will be refunded if you are deemed ineligible for examination. The total payment of \$310 must be included with your application.

3. If applicable, reasonable accommodation request and all required documentation.

Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) Disclosure: Disclosure of your SSN or ITIN is mandatory. Business and Professions Code Section 30 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 11350.6 of the Welfare and Institutions 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 number, your application for initial or renewal license will not be processed AND you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.

Collection and Use of Personal Information: The LATC, under the auspices the California Architects Board and the Department of Consumer Affairs, collects the personal information requested on this form as authorized by Business and Professions Code sections 5630, 5650, 5651, 5652 and Civil Code Section 1798.17. The LATC uses this information principally to identify and evaluate applicants for licensure, issue and renew licenses and enforce licensing standards set by law and regulation.

Mandatory Submission: Submission of the requested information is mandatory. The LATC cannot consider your application for examination unless you provide all of the requested information.

Access to Your Information: You may review the records maintained by the LATC that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information: The LATC makes every effort to protect the personal information you provide. The information you provide may also be disclosed in the following circumstances, according to the provisions of Title 16, Division 26, California Code of Regulations section 2608:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law; or
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information: For questions about this application or access to your records, you may contact the Landscape Architects Technical Committee, 2420 Del Paso Road Suite 105, Sacramento, CA 95834, (916) 575-7230 or email latc@dca.ca.gov. For questions about the Department of Consumer Affairs' privacy policy or the Information Practices Act, contact the Office of Privacy Protection, 1625 North Market Blvd, Sacramento, CA 95834, (866) 785-9663, or email privacy@dca.ca.gov.

Fingerprinting Requirement: Starting January 1, 2022, all new applicants for licensure by the LATC must submit a full set of fingerprints for the purpose of conducting a federal and state criminal history record check. Fingerprints are compared to the records of the California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI) to determine if the applicant has a criminal history.

For more information see the Fingerprinting FAQs on LATC's website at www.latc.ca.gov.

Save & Continue

Save & Exit

5. Here is what the online CSE Application for LATC looks like.
6. Review Instructions and Disclosure and click '**Save & Continue.**'



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California Supplemental Examination Application

Personal Information

All items are mandatory. Information provided will be used to determine qualifications for examination. Please read the attached instructions and disclosures. All California Supplemental Examination (CSE) candidates are required to complete and submit this application, along with the applicable fees, to the Landscape Architects Technical Committee (LATC).

First Name: *	Middle Name:	Last Name: *	Known By Any Other Name (Include Maiden Name):
<input type="text" value="Tom"/>	<input type="text"/>	<input type="text" value="Smith"/>	<input type="text"/>

DOB (Date of Birth): *	SSN/ITIN: *
<input type="text" value="08/23/1984"/>	<input type="text" value="222-11-2222"/>

Address of Record (AOR): *	Country: *	State: *	City: *
<input type="text" value="123 Street"/>	<input type="text" value="UNITED STATES"/>	<input type="text" value="California"/>	<input type="text" value="SACRAMENTO"/>

Address of Record AOR Line 2:	Zip: *
<input type="text"/>	<input type="text" value="95835"/>

Email Address:	Home Phone Number: *	Work Phone:
<input type="text" value="+44@dca.ca.gov"/>	<input type="text" value="555-222-1111"/>	<input type="text"/>

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

*Note: All required fields have a red asterisk.



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Instructions and Disclosures ✓

Personal Information ✓

Special Consideration ✕

Person History ✕

Attestation ✕

Fee and Payment ✕

California Supplemental Examination Application

Special Consideration

Instructions

Business and Professions Code section 135.4 provides that the Landscape Architects Technical Committee must expedite, and may assist, the initial licensure process for certain applicants described below. Do any of the following statements apply to you:

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

Special Consideration

1. Have you served as an active duty member of the United States Armed Forces **and** were honorably discharged? If yes, you may qualify for expedited application processing by providing a copy of your DD214 (Certificate of Release or Discharge from Active Duty). *

☐ Yes ☐ No

2. Are you a spouse/domestic partner of an active duty military member of the U.S. Armed Forces who is assigned to a duty station in California under official active duty military orders? *

☐ Yes ☐ No

Individuals married to, or in a domestic partnership (or other legal union) with, an active duty member of the Armed Forces of the United States who is assigned to a duty station in California under official active duty military orders will receive expedited license processing.

Individuals eligible for this option must attach to this application proof of marriage or domestic partnership (or other legal union) and hold a current landscape architect license in another state, district, or territory of the U.S.

Business and Professions Code section 135.4 provides that the Landscape Architects Technical Committee must expedite, and may assist, the initial licensure process for certain applicants described below. Do any of the following statements apply to you:

1. You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code. *

☐ Yes ☐ No

2. 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 *

☐ Yes ☐ No

3. 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. *

☐ Yes ☐ No

Save & Continue

Save & Exit

8. Complete all questions, upload any needed documentation, and click the green **'Save & Continue'** button.



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California Supplemental Examination Application	
<div><div>Instructions and Disclosures ✓</div><div>Personal Information ✓</div><div>Special Consideration ✓</div><div>Person History ✗</div><div>Attestation ✗</div><div>Fee and Payment ✗</div></div>	<div><div>Person History</div><div><div>Instructions</div><p>This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. Convictions that were later dismissed pursuant to California Penal Code (CPC) sections 1203.4, 1203.4a, or 1203.41, or equivalent non-California law, MUST be disclosed. (If you have obtained a dismissal of your conviction(s) pursuant the aforementioned CPC sections, please submit a certified copy of the court order dismissing the conviction(s) with your application.) Convictions that were adjudicated in juvenile court or convictions under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b) which are two years or older should NOT be reported.</p><p>If you answered "yes", attach an explanation indicating the date and place of arrest, name of court, court case number, code section violated, a brief explanation of the offense, and sentence imposed. If convicted under another name, please indicate that name. You may omit any traffic infraction for which the fine imposed was \$1000 or less or any incident that has been sealed or disposed of under California Welfare and Institutions Code section 781, Penal Code sections 1000.3, 1000.5 or 1203.45</p><p>1. Have you ever been convicted of, or pled guilty or nolo contendere to ANY criminal or civil offense in the United States, its territories, or a foreign country? *</p><p><input type="radio"/> Yes <input type="radio"/> No</p></div><div><div>Save & Continue</div><div>Save & Exit</div></div></div>

9. Read the instructions, provide explanation and upload any documentation if needed, and click the green **'Save & Continue'** button.



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<div>Instructions and Disclosures <input checked="" type="checkbox"/></div> <div>Personal Information <input checked="" type="checkbox"/></div> <div>Special Consideration <input checked="" type="checkbox"/></div> <div>Person History <input checked="" type="checkbox"/></div> <div>Attestation <input checked="" type="checkbox"/></div> <div>Fee and Payment <input checked="" type="checkbox"/></div>	<h3>California Supplemental Examination Application</h3> <div>Attestation</div> <div>Instructions</div> <div><input checked="" type="checkbox"/> I certify under penalty of perjury under the laws of the State of California that the information contained in this application is true and correct. *</div> <div>Date * 03/01/2023</div> <div>Signature *</div> <div><input type="text"/></div> <div><input type="button" value="Save & Continue"/> <input type="button" value="Save & Exit"/></div>	<p>10. Check the box that you are certifying all information contained in the application is true and correct.</p> <p>11. Type your name and click the green 'Save & Continue' button.</p>
<div>Instructions and Disclosures <input checked="" type="checkbox"/></div> <div>Personal Information <input checked="" type="checkbox"/></div> <div>Special Consideration <input checked="" type="checkbox"/></div> <div>Person History <input checked="" type="checkbox"/></div> <div>Attestation <input checked="" type="checkbox"/></div> <div>Fee and Payment <input checked="" type="checkbox"/></div>	<h3>California Supplemental Examination Application</h3> <div>Fee and Payment</div> <div>Fee and Payment</div> <div>Payment Method: * Select A Method Credit/Debit Card</div> <div>California Examination: \$ 275</div> <div>Supplemental App Fee: \$ 35</div> <div>Service Fee: 2.30%</div> <div>Total Fees: \$ 317.13</div> <div><input type="button" value="Pay and Submit"/></div>	<p>12. Select payment method.</p>



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Order Information	Billing Information	Required Fields *
Total Fees: <input type="text" value="317.13"/>	<input type="checkbox"/> Copy Details From Address of Record	
Payment Information		
  	First Name: *	<input type="text"/>
Card Number: *	Last Name: *	<input type="text"/>
CVV: *	Street 1: *	<input type="text"/>
Expiration Date: *	Street 2: *	<input type="text"/>
Month: * <input type="text" value="M..."/>	Year: * <input type="text" value="Y..."/>	Country: * <input type="text" value="UNITED STATES"/>
	State/Province: *	<input type="text"/>
	City: *	<input type="text"/>
	Zip/Postal Code: *	<input type="text"/>
<div><input type="button" value="Pay and Submit"/></div>		

*Note: Once application is submitted you will get a payment confirmation and application submission confirmation email.

13. Order information will populate.

14. Complete all payment information and click the blue **'Pay and Submit'** button.

*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.