



IOWA INTERIOR DESIGN EXAMINING BOARD
 200 EAST GRAND, SUITE 350, DES MOINES, IA 50309
 Phone: 515-725-9022

CERTIFICATE OF GOOD STANDING

Use this form if you are requesting your current state to send verification of your current registration. Attach to your application.

Please furnish either a letter or this certificate of good standing in your jurisdiction for the following applicant for Iowa interior design registration:

TO (State Board):

DATE:

NAME OF APPLICANT APPLYING BY RECIPROCITY:

ADDRESS:

Name of registrant as it appears in your jurisdiction:	
Registration/license number:	Date of original issuance:
Basis of Registration: <input type="checkbox"/> Examination <input type="checkbox"/> Transfer of examination credit from another jurisdiction <input type="checkbox"/> Reciprocity with _____ (name of jurisdiction) <input type="checkbox"/> Other (attach explanation)	
Reported grades were accepted without modification. <input type="checkbox"/> Yes <input type="checkbox"/> No (please attach explanation)	
Registration or license is active and in good standing. <input type="checkbox"/> Yes <input type="checkbox"/> No (please attach explanation)	
Date the current registration/license expires:	
Are there any disciplinary actions on the above-named individual? <input type="checkbox"/> No <input type="checkbox"/> Yes (please attach explanation)	
Certified by: Name _____ Title _____ Signature _____ Date _____	
<i>BOARD SEAL</i>	