

**State of Florida  
 Department of Business and Professional Regulation  
 Board of Landscape Architecture  
 Provider Approval Application  
 Form # DBPR LA BET 1**

**APPLICATION CHECKLIST - IMPORTANT – Submit all items on the checklist below with your application in order to ensure faster processing.**

TRANSACTION	APPLICATION REQUIREMENTS
<p style="text-align: center;"><b>Landscape                      Architecture                      Continuing                      Education Provider                      Approval - Individual</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Complete this application.</li> <li><input type="checkbox"/> Submit the \$250 fee with this application. Make check payable to the Department of Business and Professional Regulation or DBPR.</li> <li><input type="checkbox"/> Submit curriculum vitae or resume listing applicant's education and work experience.</li> </ul>
<p style="text-align: center;"><b>Landscape                      Architecture                      Continuing                      Education Provider                      Approval –                      Organization</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Complete this application.</li> <li><input type="checkbox"/> Submit the \$250 fee with this application. Make check payable to the Department of Business and Professional Regulation or DBPR.</li> </ul>

**Please mail your completed application, documentation and required fee(s) to:**

Department of Business and Professional Regulation  
 1940 North Monroe Street  
 Tallahassee, FL 32399-1046

**State of Florida**  
**Department of Business and Professional Regulation**  
**Board of Landscape Architecture**  
**Provider Approval Application**  
**Form # DBPR LA BET 1**

Check the appropriate box in Section I and complete the remainder of the application appropriately. If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at **850.487.1395**.

**For additional information see instructions of this application.**

**Section I - Application Type**

CHECK ONE OF THE APPLICATION TYPES	
<input type="checkbox"/>	<b>Approval of Landscape Architecture Continuing Education Provider – Individual - \$250.00</b> (Complete Sections II and III and attach curriculum vitae or resume listing applicant's education and work experience). <b>See Section IV for more information.</b> [1305/1030]
<input type="checkbox"/>	<b>Approval of Landscape Architecture Continuing Education Provider – Organization - \$250.00</b> (Complete Sections II and III). [1305/1030]

**Section II – Applicant Information - Provider**

PERSONAL INFORMATION <i>(Provider/Owner)</i>			
Last/Surname (Provider)	First	Middle	Suffix
Social Security Number (If Individual)*			
Federal Employer ID Number (If organization)			
GENERAL IDENTIFICATION			
Is Provider approved by any other board within the Department of Business and Professional Regulation to provide continuing education?			
<input type="checkbox"/> Yes			
<input type="checkbox"/> No			
If yes, what is the provider approval number?			
MAILING ADDRESS			
Company Name			
Street Address or P.O. Box			
City	State	Zip Code (+4 optional)	
County (if Florida address)	Country		
BUSINESS LOCATION ADDRESS (IF DIFFERENT THAN MAILING ADDRESS)			
Company Name			
Street Address			
City	State	Zip Code (+4 optional)	



**Section II – Applicant Information – Provider – continued**

<b>IF THE APPLICANT IS A NON-INDIVIDUAL/ORGANIZATION, CHECK THE APPROPRIATE BOX:</b>	
<input type="checkbox"/> Vendor of equipment material or software used in the practice of landscape architecture <input type="checkbox"/> Accredited university, college, or community college <input type="checkbox"/> Vocational/Technical school <input type="checkbox"/> Private commercial educator <input type="checkbox"/> Governmental agency <input type="checkbox"/> State or national professional association <input type="checkbox"/> Other independent entity	
Is the applicant a landscape architect with a Florida license to practice landscape architecture who is not under disciplinary restrictions pursuant to any order of the Board? Check One:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Section III – Affirmation By Written Declaration**

<b>AFFIRMATION BY WRITTEN DECLARATION</b>	
<p>I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. <b>I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.</b></p>	
Signature:	Date:
Print Name:	

## Section IV – General Information

*If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at **850.487.1395***

- *To demonstrate the education and/or experience necessary to instruct landscape architects in the conduct of their practice for continuing education credit, an applicant for continuing education provider status must be either a vendor of equipment material or software used in the practice of landscape architecture, an accredited educational institution, a commercial educator, a governmental agency, a state or national professional association whose primary purpose is to promote the knowledge, skills and abilities associated with the practice of landscape architecture, or a landscape architect with a Florida license to practice landscape architecture who is not under disciplinary restrictions pursuant to any order of the Board. In addition, the applicant must demonstrate particular education, experience or skill which sets the applicant apart from the landscape architects who the applicant proposes to instruct. 61G10-18.002 (1), F.A.C.*
- Individual applicants (landscape architects with a Florida license to practice landscape architecture who are not under disciplinary restrictions pursuant to any order of the Board) shall submit a detailed curriculum vitae or resume listing education and work experience. These applicants need to demonstrate their approval would be consistent with 61G10-18.002 (1), above.
- The American Society of Landscape Architects, the Florida Chapter of the American Society of Landscape Architects, the Florida Department of Transportation, the Florida Department of Environmental Protection, and state universities, colleges, and community colleges in Florida will be considered approved providers. The provider as well as all courses must be assigned provider and course numbers for attendees to be eligible to receive credit. Providers must meet all reporting requirements set forth in Section 455.2178, F.S., and courses must meet criteria set forth in subsection 61G10-18.006(5), F.A.C. Providers must submit Form DBPR LA BET 1, “Provider Approval Application,” to be assigned a provider number and Form DBPR LA BET 2, “Course Approval Application,” to be assigned a course number and to receive course approval. Supporting documentation is not required; however, all other requirements must be met. Advanced instruction in the Florida Building Code curriculum must be established or accredited by the Florida Building Commission.
- To maintain Provider status in good standing, providers must adhere to all provider requirements outlined in landscape architecture Rule 61G10-18, F.A.C and 455.2178, FS.
- Certificates of completion must be awarded upon successful completion of all approved continuing education courses and must include the following information:
  - Provider’s name
  - Provider’s approval number
  - Licensee’s name and licensure number
  - Approved course title
  - Course approval number
  - Date of course completion
  - Number of approved continuing education credit hours awarded and subject area
- Providers shall not advertise a course as an approved continuing education course until the course is approved by the Board of Landscape Architecture.
- Approved course numbers and approved titles shall be used in all advertisements.
- Any substantive changes regarding the provider’s application information must be filed with the Department or the Department’s vendor within 30 days of the change.
- Provider approval is valid until May 31 of odd numbered years and must be renewed.
- Provider must work with licensee to resolve reporting conflicts.