



NEVADA STATE BOARD OF ARCHITECTURE, INTERIOR DESIGN & RESIDENTIAL DESIGN

2080 E. Flamingo Rd., Suite 120
Las Vegas, NV 89119

(702) 486-7300 – phone
(702) 486-7304 – fax
nsbaidrd@nsbaidrd.nv.gov

Letter of Reference

For: _____
(Applicant)

Dear: _____
(Reference)

The above named person is an applicant for **RESIDENTIAL DESIGN EXAMINATION** registration and has submitted your name as a reference. Please complete the following questions regarding the applicant's character, qualifications and fitness for registration and **return it to our office at the above address.**

1. During what years did you know the applicant well? _____
2. Are you related to the applicant? _____ If so, How? _____
3. Would you employ the applicant in a position of trust? _____
4. If you have been a coworker or an employee of the applicant, please tell us the general nature of relations with him/her, together with an evaluation of his/her work. _____

5. If you required the services of a professional person for work commensurate with the applicant's experience, would you be willing to employ him? _____
6. Do you recommend the applicant for registration? _____
7. Please state your professional registration number. _____
8. Please affix your stamp or seal in the lower left corner of this form. If a stamp or seal is not required by your state of registration, please indicate so and attach a copy of your current registration card or certificate.

Date

Signature

Affix seal or stamp here

Print or type name