



Ohio Architects Board

77 South High Street, 16th Floor
Columbus, Ohio
43215-6108

Phone (614) 466-2316
Fax (614) 644-9048
www.arc.ohio.gov

Instructions for Emeritus Architect Application

- Emeritus status in the state of Ohio is not the same as Emeritus status in the American Institute of Architects or any other organization. State of Ohio Emeritus architect status must be renewed every two years, and a renewal fee of \$125.00 must be paid in order to maintain Emeritus status. A renewal notice will be sent in the mail.
- Emeritus architects are exempt from the Ohio Mandatory Continuing Education requirements and may use the title “Emeritus Architect”.
- Submit the notarized Emeritus Application.
- Emeritus Architects must meet the following criteria:
 - Fully retired and *not engaging in any* of the activities defined as the practice of architecture in Ohio Administrative Code 4703-1-01.
 - Over age 65.
 - Licensed in the state of Ohio for at least 10 years.
- Incomplete applications will be returned. Keep a copy for your files.
- Include a check or money order in the amount of \$125.00, payable to, “Treasurer, State of Ohio”.
- Mail to: Ohio Architects Board, 77 S. High St., 16th Floor, Columbus, Ohio 43215-6108.

For questions or assistance, contact:

Jodi Ross, Executive Secretary

Phone: (614) 466-2316

Fax: (614) 644-9048

Email: jodi.ross@arla.state.oh.us



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Application for Emeritus Architect

Name		Email (if available)
Ohio License #	Year Issued	Birth Date (month/day/year)
Mailing address		County (if Ohio)
City and State	Zip code	Phone

Answer all of the following questions. If you answer yes to any of questions 4 - 6, please include a signed and dated statement of explanation, including supporting documentation. Documentation should include, but is not limited to, orders issued by any jurisdiction.

1. **Yes** **No** I am fully retired and not engaged in any of the activities defined as the practice of architecture in Ohio Administrative Code section 4703-1-01.
2. **Yes** **No** I am at least 65 years of age.
3. **Yes** **No** I have held an Ohio license to practice architecture for at least ten years.
4. **Yes** **No** Have you been the subject of disciplinary action by any professional registration board? Disciplinary action includes, but is not limited to, reprimands, fines, probation, suspension, supervised practice, revocation, cease and desist or consent orders, settlement agreements, stipulations, etc.
5. **Yes** **No** Have you been convicted of any crime (other than a minor misdemeanor)?
6. **Yes** **No** Are you registered with the Ohio Civil Child Sexual Abuse Registry under ORC 4799.01?

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Board Use Only	Date Received	Check #	Director Approved	Board Approved
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A F F I D A V I T

By signing this document, the licensee affirms all questions have been truthfully answered, and no information has been withheld that might affect the application. Failure to respond truthfully can result in board sanctions, including denial of the application, fines, suspension, revocation and/or other penalties.

Signature _____

Subscribed and sworn before me on this _____ day of _____, 20_____

in the County of _____, State of _____.

Signature of Notary Public

Notary Seal

My commission expires _____