

REQUEST CHANGE FROM EMERITUS TO ACTIVE STATUS

Please provide all information requested below and return with your check for the total amount of the status change fee plus the renewal fee. Please return the application prior to your next expiration date. For more information on returning to active status, please see the web site at <u>TBAE - Active Status</u> to review Rule 1.67, 3.67, 5.77.

I. Name:	
Address:	
City, State, Zip:	
Registration #:Profession (circle one): <u>A</u>	Architect / Landscape Architect / Registered Interior Designer
E-mail:	Daytime Phone:
□ Check here if you wish to change your	mailing address to the above.
II. Have you been convicted of any crime, oth the Board?	her than a minor traffic violation, that you have not reported to
If yes, date of conviction	Please attach a letter of explanation.
Signature	Date

If you have any questions, please contact <u>ce@tbae.texas.gov</u>.

NOTICE TO PERSON COMPLETING THIS FORM: With few exceptions, upon request you are entitled to be informed about the information the Texas Board of Architectural Examiners (TBAE) collects about you through this form. Pursuant to Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review such information. Pursuant to Section 559.004 of the Texas Government Code, you are entitled to have TBAE correct information about you that is incorrect.