

# Application for Landscape Industry Certification in Idaho

## National Association of Landscape Professionals (NALP) Certification Program

*(Please Print Clearly or Type)* A separate application is required for **each** test applicant. You may photocopy this form. Payment for multiple applicants from same firm can be combined.

**Applicant Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**Company Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**Please send correspondence to me at:**     Home     Work

**Do you need the test in Spanish?**         Yes

**How many years have you worked in the industry?** \_\_\_\_\_

**Must have one-year experience to take exam**

**Test Date: April 13, 2017 in Boise, Idaho**

**(Application Deadline: April 7, 2017)**

To become Landscape Industry Certified nationally an applicant must pass one designation. Additional designations can be taken at future test dates.

**Please select the one test designation you will be taking:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Softscape Installation Module             | <input type="checkbox"/> \$250 Members | <input type="checkbox"/> \$350 Non-members |
| <input type="checkbox"/> Hardscape Installation Module             | <input type="checkbox"/> \$250 Members | <input type="checkbox"/> \$350 Non-members |
| <input type="checkbox"/> Irrigation Module                         | <input type="checkbox"/> \$250 Members | <input type="checkbox"/> \$350 Non-members |
| <input type="checkbox"/> Turf Maintenance Module                   | <input type="checkbox"/> \$250 Members | <input type="checkbox"/> \$350 Non-members |
| <input type="checkbox"/> Ornamental Maintenance Module             | <input type="checkbox"/> \$250 Members | <input type="checkbox"/> \$350 Non-members |
| <input type="checkbox"/> Retakes – fill in here ones needed: _____ |  | <input type="checkbox"/> \$45.00           |

**T-Shirt Size**     Medium     Large     X-Large     XX-Large     Other \_\_\_\_\_

Questions:        Call Ann Bates at (208) 681-4769

Refunds:         Full refunds, less 10%, will be available only when written request is received at least 30 days prior to test.

**Please complete application form and mail, along with your payment to:**

INLA-CLT, P.O. Box 2065, Idaho Falls, ID 83403 or fax to (208) 529-0832 with credit card info

**Payment MUST Be Received with Application:**    Check # \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_