

**New Hampshire Landscape Professional Certification Program
APPLICATION FOR EXAMINATION**

Name: _____ Date: _____

Address: _____

City/ State/ Zip: _____

Telephone: _____

e-mail: _____

This application is for:

_____ Initial Certification

_____ Re-examination (Date of Previous Exam: _____)

I certify that the information contained in this application is true. I understand that falsification of information in this application is grounds for revocation of certification. I also authorize the New Hampshire Landscape Association's Certification Committee to contact employers or sponsors named herein for verification of information.

Signature: _____ Date: _____

Eligibility (please check one):

Option I: A total of 2100 hours of employment in the landscape industry

Option II: Not less than 1400 hours of employment in the landscape industry and at least one year of post secondary horticultural education.

Employment History:

List Recent Employer(s):

Employer I: _____ Telephone: _____

City/ State/ Zip: _____

Job Title: _____ Dates of Employment: _____

Employer II: _____ Telephone: _____

City/ State/ Zip: _____

Job Title: _____ Dates of Employment: _____

Employer III: _____ Telephone: _____

City/ State/ Zip: _____

Job Title: _____ Dates of Employment: _____

Horticultural Education (Option II only):

Name of School: _____

Address of School: _____

City/ State/ Zip: _____

Course Completed: _____ Dates: _____

School's Major Instructor, Advisor, Dean or Registrar:

Signature: _____ Title: _____

Printed Name: _____ Date: _____

Fees:	_____ \$120.00	NHLA Member
	_____ \$150.00	Non-member
	_____ \$60.00	Re-exam, per section, member
	_____ \$75.00	Re-exam, per section, non-member

A copy of the Certification Manual is included with your exam fee. The manual is distributed as a .pdf file on a thumb drive.

If you would like a copy of the manual without registering for the exam the cost is \$30.00.

Amount Enclosed: _____

Please make checks payable to NHLA.

Mail completed application, Code of Ethics form and the proper fee(s) to:

**NHLA Certification Committee
c/o Abby Zuidema
126 Burkitt St
Portsmouth, NH 03801**

New Hampshire Landscape Professional Certification Program CODE OF ETHICS

In order to earn the title of *New Hampshire Certified Landscape Professional*, applicants must successfully complete a written examination, attest to educational and / or field experience, and agree to abide by the following rules:

1. I will promote the highest ethical standards in the conduct of myself and my business.
2. I will assume the responsibility of meeting the objectives of the New Hampshire Landscape Association (NHCLA).
3. I will strive to improve my knowledge and skills in the field of horticulture.
4. I agree that, should my Certification not be renewed or be revoked for any reason, I will not display any distinguishing emblems or titles, or in any manner whatsoever imply that I am a *New Hampshire Certified Landscape Professional*.
5. I fully understand that, should I be granted certification, such certification is limited and must be renewed each year by earning Maintenance Credits and payment of the renewal fee to NHCLA. I understand that my certification will be automatically revoked unless renewed.
6. I understand that certification is granted by the New Hampshire Landscape Association as recognition of knowledge and achievement for those who voluntarily qualify and is in no way mandatory. I understand that, upon certification, I am entitled to call myself a *New Hampshire Certified Landscape Professional* and to use the initials NHCLP after my name, as well as to display the certification emblem in all forms.

I AGREE TO ALL THE ABOVE

_____ (Signature)

_____ (Date)