

**NATIONAL COUNCIL FOR INTERIOR DESIGN**  
**QUALIFICATION (NCIDQ) VERIFICATION FORM**

**NCIDQ**

1602 L Street NW, Suite 200  
Washington, DC 20036  
(202) 721-0220  
[www.ncidq.org](http://www.ncidq.org)

**NOTE: THE FEE FOR THIS SERVICE IS \$30.00. Your check or money order made payable to NCIDQ must accompany your request. This fee is subject to change.**

NCIDQ is requested by the undersigned to furnish Pearson VUE, on behalf of the District of Columbia Board of Architecture and Interior Designers with the requested information:

**VERIFICATION** that this individual has successfully passed the standard NCIDQ examination.  
**Authorization to provide this information may be given only by the NCIDQ undersigned certificate holder.** No proxies are permitted.

**PRINT OR TYPE:**

**YOUR NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**ADDRESS 1:** \_\_\_\_\_

**ADDRESS 2:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**TELEPHONE NUMBER:** (     ) \_\_\_\_\_

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The NCIDQ certificate verification process requires that you also provide the following information, if known, for purposes of confirmation:

**NCIDQ CERTIFICATE NUMBER:** \_\_\_\_\_ **DATE OF ISSUE** \_\_\_\_\_

**I, THE UNDERSIGNED ATTEST THAT I AM THE NCIDQ CERTIFICATE HOLDER AND REQUEST THAT VERIFICATION OF SAME BE PROVIDED TO PEARSON VUE ON BEHALF OF THE BOARD OF ARCHITECTURE AND INTERIOR DESIGNERS.**

**SIGNATURE:** \_\_\_\_\_

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**When completed, this form should be returned to:**

PEARSON VUE  
Dept. DC – AR  
8401 Corporate Drive  
Metro Plex I, Suite 250  
Landover, MD 20785