2026

State of Alabama
Board of Examiners of Landscape Architects

2740 Zelda Rd., Box 5 Montgomery, AL 36106 334-262-1351
LandscapeBoard@alstateboard.com

Application for Renewal — Landscape Architect Registration

Individual

Publicly Advertised Address (Used on our website and for general purposes) *Printed information must be legible.

Name: _____

Bus. Name: _____ ☐ Check if any info in this section is new

Bus. Address: _____

Alabama Registration Number: _____ Last 4 digits of SS#: _____ Phone #: _____ Race: _____

E-Mail Address: _____

IS YOUR COMPANY: ☐ Firm ☐ Corporation ☐ Professional Association ☐ Partnership

POSITION IN FIRM: ☐ Individual ☐ Partner ☐ Employee ☐ Stockholder ☐ Officer

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Preferred Mailing Address (If different from above)

Address: _____ ☐ Check if any info in this section is new

E-Mail Address: _____ Phone #: _____

INDIVIDUAL RENEWAL FEE	**$150.00**
LATE PENALTY	**$ 50.00**
(If received or postmarked after January 31)	

Have you ever been convicted of a crime other than a minor traffic offense? ☐ Yes ☐ No
If yes, please explain on separate sheet.

I certify that I have read the Alabama Landscape Architectural Registration Law and Code of Conduct that is on the Board's website (www.abela.alabama.gov) and I am qualified to practice Landscape Architecture in the State of Alabama. I also certify that I have read the Alabama Landscape Architectural Code of Conduct (that is also on the Board's website) and will act in accordance with the requirements outlined in the Code of Conduct. The information contained on this form is true and accurate to the best of my knowledge.

_____
Signature

Completed application and required fee payable to Alabama Board of Examiners of Landscape Architects (or ABELA) must be received or postmarked no later than January 31st in order to insure timely renewal of your license. A late charge of $50.00 will be added if not received or postmarked by January 31st.

*Printed information must be legible

Continuing Education Credit Form – printed information must be legible.

Section A

I hereby certify that I qualify for exemption from continuing education under Rule 500-X-2-.14 (10) based on:

☐New Licensee ☐Military Service ☐Foreign Employment ☐Disability/Illness ☐Retired ☐Age 65 or older: Birthday _____

The Summary of Credits below is true and correct and states accurately those Professional Development Hours (PDH) which I have earned during the period from January 1, 2025 through December 31, 2025. **(Complete Section B Summary of Credits.)**

Date: _____ Signature: _____ AL Registration No. _____

Section B — Summary of Credits

Sending verification of PDH is NOT required unless you are audited. You are responsible for maintaining those records.

Date(s) of Activities	Sponsoring Organization Name, City & State	Activity Description	Health, Safety & Welfare Hours (HSW)	Non-HSW Hours

Description of Activities	PDH Units	Description of Activities	PDH Units
1. Successfully completing/monitoring college or university sponsored courses. Rule 500-X-2-.14 (6)(a)	Completing-1 Sem. hour: 45 PDH 1 Qtr. hour: 15 PDH Monitoring- 1 Sem. hour: 15 PDH 1 Qtr. hour: 10 PDH	5. Teaching/instructing college or university courses/seminars Rule 500-X-2-.14 (6)(e)	2 times PDH earned in #2, 3 and/or 4
2. Successfully completing courses which are awarded continuing educational units (CEU) Rule 500-X-2-.14 (6)(b)	10 PDH for each CEU	6. Authoring published papers, articles or books Rule 500-X-2-.14 (6)(f)	1 PDH times preparation time (not to exceed 25 PDH)
3. Attending seminars, tutorials, short courses, correspondence courses, televised or videotaped courses Rule 500-X-2-.14 (6)(c)	1 PDH for each contact hr.	7. Making presentations at technical meetings Rule 500-X-2-.14 (6)(g)	2 times PDH earned in 1 through 4
4. Attending in-house programs sponsored by corporations or other organizations Rule 500-X-2-.14 (6)(d)	1 PDH for each contact hr.	8. Attending program presentations at related technical or professional meetings Rule 500-X-2-.14 (6)(h)	1 PDH for each contact hr.

Carryover PDH earned October 15, 2024 through December 31, 2024 to be used in fulfillment of 2026 requirements.	HSW: _____	non-HSW: _____
Total PDH earned in 2025	HSW: _____	non-HSW: _____
Total PDH available for credit in 2025 (16 required) (sum of lines 1 and 2)	HSW: _____	non-HSW: _____
Carryover PDH earned October 15, 2025 through December 31, 2025 to be used for the 2027 renewal (Not to exceed 16 hours)	HSW: _____	non-HSW: _____