

IDEP Verification Form

Verification/Change of Employment, Supervisor Qualification and Mentor

- 3,520-Hour Program**
- 5,280-Hour Program**



National Council for Interior Design Qualification
1602 L Street NW, Suite 200
Washington, DC 20036-5681
Phone: 202-721-0220
Fax: 202- 721-0221

Participant Information

Participant: _____ SS#: _____
Address: _____
Phone: _____ Fax: _____ E-mail: _____
Commencement of Employment (day/month/year): _____

Employment Information

Firm Name: _____
Address: _____
Phone: _____ Fax: _____

Supervisor Information

Supervisor's Name/Title: _____
Must indicate A or B below
A. Supervisor's NCIDQ Certificate Number: _____
B. Registered/Licensed/Certified Interior Designer and/or architect in (state/province): _____ License Number: _____

Mentor Information

Name/Title/Firm: _____
Address/Phone: _____
Must indicate A or B below
A. NCIDQ Certificate Number: _____
B. Registered/Licensed/Certified Interior Designer in (state/province): _____ License Number: _____

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