

LSBID

Emerging Professional Award

The LSBID Emerging Professional Award acknowledges new professionals as promising future leaders in the field of Interior Design. The Award is intended for Interior Designers in the State of Louisiana who have applied for licensure or who have been licensed 8 years or less. Nominees must have demonstrated professional excellence in the field of practice, must show leadership in the profession, and must demonstrate passion and enthusiasm for the profession of Interior Design.

Submission Requirements:

- Application
- Resume
- Narrative not to exceed one page describing accomplishments and involvement in the profession. Include offices held, honors, publications, committees and similar.
- Two letters of recommendation not to exceed one page. At least 1 from a licensed professional. Letters should highlight the applicant's professionalism and skills as an Interior Designer.

Award:

The *Emerging Professional Award* will provide funding to the recipient by waiving fees for the following:

- Waiving of the Renewal Fee for the next year of licensure - \$150 value
- Waiving the fee for the Board sponsored CEU Day for the next 2 years of licensure - \$200 value
- Recognition on lsbid.org and in an email to all Louisiana Licensed Interior Designers

*There is no cash equivalent for this award

General Information:

Nominees must be in good standing with LSBID

Submissions may be received by mail to the address below or by email to admin@lsbid.org

Deadline for postmark of all information is July 14

Winners will be announced by the end of August

For questions email admin@lsbid.org



Louisiana

Office of the Governor
State Board of Examiners
of Interior Designers

11736 Newcastle Avenue, Bldg. 2, Suite C
Baton Rouge, LA 70816
Telephone 225.295.8425 Fax 225.304.6655

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Application

| |
|--|
| Name: |
| Phone: |
| Email: |
| Employer: |
| <input type="checkbox"/> Licensed Interior Designer # _____ <input type="checkbox"/> License Application Pending |

All items must be submitted together as one packet. Incomplete applications will not be reviewed.

I HEREBY STATE THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

APPLICANT'S SIGNATURE

DATE



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