

Application for Approval to Sit For the NCEES Principles and Practice of Engineering (PE) Examination

PA STATE REGISTRATION BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS AND GEOLOGISTS

Mailing Address:
PCS Attn: PA PE
P.O. Box 198728
Nashville, TN 37219

Tel: 717.783.7049 E-Mail: st-engineer@pa.gov
Website: www.dos.state.pa.us/eng

Courier Address:
PCS Attn: PA PE
150 Fourth Avenue N.
Suite 800
Nashville, TN 37219

Applicant Information

QUALIFICATIONS: Refer to Section 4.2(c) of the Engineer, Land Surveyor and Geologist Registration Law for specific qualification requirements. You may view the Board's law on-line at www.dos.state.pa.us/eng by selecting the link for "Law".

To qualify for the PE examination you **must** have **successfully completed the NCEES Fundamentals of Engineering (FE) examination** (there is **NO EXCEPTION** to this requirement), **be certified as an Engineer-In-Training (EIT)** AND you must show satisfactory proof of having obtained **at least four (4) years of progressive experience in engineering work performed AFTER the issue date of the EIT certificate and under the supervision of a licensed professional engineer**. YOU MAY NOT ANTICIPATE WORK EXPERIENCE. You must have obtained ALL required work experience **PRIOR** to the application deadline (as set forth in §37.16 of the Board's Regulations) to be considered for the corresponding examination administration.

Application must be typed OR printed in **black ink**. **ALL requested information is MANDATORY.**

DO NOT use "Present" as an indication for any time-line and/or ending date; you should use the date the respective information is completed.

Any application that is missing information requested on the application and/or form will be returned with a discrepancy letter.

ANY application discrepancy is likely to cause a significant review delay that may result in your application not being reviewed in time to be considered for the examination administration other than the one which you are initially applying for.

If you passed the FE exam in any State or Jurisdiction other than Pennsylvania, you must send the Verification of Examination/Registration form to the State Board or Licensing Jurisdiction where you passed the FE and have their office send the fully completed form **directly** to the PCS office. The form must be received by PCS and **MUST** be postmarked no later than December 1 for the April exam and no later than July 1 for October exam. This form is **NOT** required if you successfully completed the FE examination in Pennsylvania.

You must contact your College/University to have them mail an *Official Final Transcript* directly to the PCS office. ALL transcripts must be received in the PCS office via the U.S. Postal Service (they **WILL NOT** be accepted via E-mail, Fax or with your application) and **MUST** be postmarked no later than December 1 for the April exam and no later than July 1 for October exam.

If your bachelor's degree is from a school outside of the United States – your educational credentials must be evaluated to determine the equivalency of your degree in engineering from an accredited U.S. school.

This is a **MANDATORY** requirement, regardless of you having a graduate degree from a U.S. school, if you wish to be considered for approval to sit for the examination based upon your education.

Contact: NCEES - Website: www.ncees.org, Tel: 800.464.7650 for additional information. The evaluation **MUST** be transmitted directly to the Board Office (NOT PCS) from NCEES.

***You should note that if you are applying for approval with a foreign education that your requested examination administration date **IS NOT** guaranteed.

The Amplified Record of Work Experience form must be fully completed according to the instructions on form.

NOTE: The Board **may** grant 1 year of engineering work experience credit for each post-baccalaureate degree earned by applicants for licensure, not to exceed 2 years, provided that ALL of the following requirements are met:

- 1) The degree **MUST** be from an engineering program approved by the Board (an institution that offers an ABET-accredited baccalaureate degree in the same discipline);
- 2) The degree **MUST** be in the exact same discipline as an earned undergraduate degree (which **MUST** be from an ABET accredited institution);

AND

- 3) The academic time **MAY NOT** be concurrent with ANY earned work experience.

The Board will **NOT** make a determination regarding the amount of work experience that may be granted for an earned post-baccalaureate degree until they have received a **fully completed application** that has been appropriately submitted in accordance with ALL application deadline requirements.

References must have personal knowledge of your work experience and collectively must be able to attest to the entire amount of required engineering work experience. References should include your immediate supervisor(s). Applicants must **NOT** be related to those listed as references. At least three (3) of your five references **must be licensed Professional Engineers**. The other two (2) may be licensed Professional Land Surveyors or Licensed Professional Geologists (OR similarly qualified individuals [as determined by the Board]); however they **must** be able to attest to your engineering work experience, character and qualifications.

Reference forms must be received in the PCS office, **postmarked** no later than December 1 for the April exam and no later than July 1 for the October exam.

When completing the Criminal and Disciplinary Information, if you answer "**YES**" to any **criminal** or **disciplinary** question, you **must** provide ALL requested court documents AND the signed, written explanation. ALL information must be postmarked by the appropriate application deadline date, in order for your application to be considered for that examination administration.

Sign and date the Social Security Act Certification AND the Certification Statement

Maintain a copy of your completed application for your records prior to submission. Copies of an application **WILL NOT** be provided to applicants once they have been received.

Mail your application and fee of \$100 (made payable to "PCS") to the appropriate address.

NOTE: *If you would like to know when your application has been received by PCS* you **MUST** mail your application "Certified-Return Receipt" to the **Courier address**.

Mailing Address: PCS Attn: PA PE, P.O. Box 198728, Nashville, TN 37219

Courier Address: PCS Attn: PA PE, 150 Fourth Avenue N., Suite 800, Nashville, TN 37219

PCS will initially process your application and fee. Once ALL required application materials have been received by PCS and your application is considered fully complete, your application will be forwarded to the office for the Pennsylvania State Registration Board for Professional Engineers, Land Surveyors and Geologists (Board) for application review and evaluation by the Board.

If ANY supporting application materials and/or documents are received AFTER the application deadline (as established by §37.16 of the Regulations of the Board) your application will be considered for the NEXT examination administration.

Every *fully complete* (all required items are postmarked by the application deadline) application that is received by PCS will be guaranteed at least ONE application review by the Board office, per examination administration. If any application discrepancies are noted by the Board office when your application is reviewed, you will be notified in writing by the Board office (you will be sent a “discrepancy letter”); any response to a discrepancy letter that you may be sent will be considered an application re-evaluation and each response will be reviewed *in the date order it was received* only **AFTER** every examination application that was appropriately received by the application deadline has had at least ONE initial review.

Requested examination administration dates **are not guaranteed.**

It is the responsibility of the applicant to provide ALL of the information requested on the application form, additionally, it is the responsibility of the applicant to stay in touch with references, colleges/universities, other licensing jurisdictions, court offices etc... to ensure that ALL required paperwork and/or documentation is being forwarded to the PCS by the application deadline date.

Requested examination administration dates are not guaranteed.

MANDATORY Application Deadline Requirements

The **fully completed Application form, ALL required supporting application documents and the Application fee** must be postmarked *ON OR BEFORE* the **application deadline** that has been established by §37.16(c) of the Regulations of the Pennsylvania State Registration Board for Professional Engineer, Land Surveyors and Geologists (“Board”).

The application deadlines (as established by Regulation) are *December 1st to be considered for the April exam* and *July 1st to be considered for the October exam*.

There are NO exceptions.

A postmark is defined as the official mark that the United States Postal Service uses to cancel your postage.

*****Postage meter dates from businesses are not considered a postmark.*****

Courier service packages must clearly indicate the date sent. **

The Pennsylvania State Registration Board for Professional Engineers, Land Surveyors and Geologists

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P.O. Box 198728
Nashville, TN 37219

Tel: 717.783.7049

E-Mail: st-engineer@pa.govWebsite: www.dos.state.pa.us/engCourier Address:

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Section 1: Applicant Information

Black ink or Typed ONLY

Legibly print or type your name as it appears on the government-issued ID that you will take to the exam. You must use the same name and spelling when scheduling with PCS AND when registering with the NCEES.

Last Name

First Name

Middle

Social Security Number

Date of Birth

Street Address:

(Continued)

City

State

Zip

Daytime Phone

Extension

E-Mail Address (By providing your E-Mail address you agree to be contacted via E-Mail by PCS or the Board)

Maiden Name or Prior Name (if applicable)

If any application documents will be sent in a maiden/prior name you MUST submit one of the following: a copy of your marriage certificate, a copy of a divorce decree that indicates the retaking of your maiden name or other legal court document supporting a legal name change

Section 2: Board Application Fee

Submit check or money order in the amount of **\$100.00** payable to "PCS."

A \$25.00 processing fee will be assessed for any payment returned by your bank, regardless of the reason for non-payment. Fees are non-transferable and non-refundable.

Section 3: Examination Information

Have you passed the FE Exam?

Yes (continue)

No (STOP: You must pass the FE exam to qualify for approval to sit for the PE exam)

State FE Exam was passed (if other than PA complete all information and have Exam Score Certification sent)

Date FE Exam was passed

EIT Issue Date:

I am requesting approval to sit for for the following Principles and Practice of Engineering (PE) exam administraton date (check one): April _____ October _____

Name of Applicant (Print):

Section 4: Education (If additional space is required, submit on a 8 1/2" x 11" sheet of paper)

Transcripts must be mailed directly from college/university to PCS.

DEGREE	UNIVERSITY/COLLEGE NAME	CAMPUS ADDRESS (CITY AND STATE)	MAJOR	CONFERRAL DATE
BS				
MS				
PHD				

Section 5: References (See "Reference Information" on Instruction Page)

List five references - Name, State, Professional License Number and Telephone number

Name	Address	State In Which Licensed	License #	Telephone #
1.				
2.				
3.				
4.				
5.				

Section 6: Applications previously submitted to this Board.

Engineer-In-Training <input type="checkbox"/>	Professional Engineer <input type="checkbox"/>	Surveyor-In-Training <input type="checkbox"/>	Professional Land Surveyor <input type="checkbox"/>	Professional Geologist <input type="checkbox"/>	None <input type="checkbox"/>
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Section 7:

Do You Read ☐ Yes ☐ No

Write ☐ Yes ☐ No

and Speak ☐ Yes ☐ No the English Language?

Name of Applicant (Print):

Section 8: The Following Questions Must Be Answered

If you answer "Yes" to any criminal or disciplinary questions you must attach an 8 1/2" x 11" sheet of paper bearing your signature that provides the Board with a full explanation of the matter. You must also submit certified copies of any and all court documents pertaining to any legal matter, (documents shall include all charging documents, final disposition, sentencing requirements and proof of completion of any sentence imposed). Certified Documents cannot be accepted electronically (fax or E-mail). Acceptable documentation MUST be postmarked by December 1st for the April exam and July 1st for the October exam.	YES	NO
Do you hold, or have you ever held, a license, certificate, permit, registration or other authorization to practice a profession or occupation in any state or jurisdiction?		
If you answered yes to the above question, please provide the profession and state or jurisdiction. Please do not abbreviate the profession. _____		
Have you had disciplinary action taken against a professional or occupational license, certificate, permit, registration or other authorization to practice a profession or occupation issued to you in any state or jurisdiction or have you agreed to voluntary surrender in lieu of discipline? If action was taken in Pennsylvania – Certified copies NOT required.		
Do you currently have any disciplinary charges pending against your professional or occupational license, certificate, permit or registration in any state or jurisdiction?		
Have you withdrawn an application for a professional or occupational license, certificate, permit or registration, had an application denied or refused, or for disciplinary reasons agreed not to apply or reapply for a professional or occupational license, certificate, permit or registration in any state or jurisdiction?		
Have you been convicted (found guilty, pled guilty or pled nolo contendere), received probation without verdict or accelerated rehabilitative disposition (ARD), as to any criminal charges, felony or misdemeanor, including any drug law violations? Note: You are not required to disclose any ARD or other criminal matter that has been expunged by order of a court.		
Do you currently have any criminal charges pending and unresolved in any state or jurisdiction?		

Name of Applicant (Print):

Section 9: Social Security Act Certification

This licensing board is obligated to inform each applicant or licensee from whom it requests a Social Security number on any application or form that disclosing such number is mandatory in order for this licensing board to comply with the requirements of the federal Social Security Act pertaining to child support enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa. C.S. § 4304.1(a). In order to enforce domestic support orders, at the request of the Commonwealth's Department of Public Welfare (DPW), this licensing board must provide DPW information prescribed by DPW about the licensee, including the Social Security number.

In the event that this licensing Board takes disciplinary action against an applicant or licensee, this board may disclose their Social Security number if applicant or licensee voluntarily agrees to the disclosure of this information to the appropriate professional association. This organization compiles information about individual applicants and licensees and transmits that information to other licensing boards in order to coordinate licensure and disciplinary activities between the individual states. If you do not voluntarily provide your Social Security number for this purpose, information about you will still be transmitted to this organization should this licensing board discipline you, but that information will not include your Social Security number.

I certify that I have read the above statement, understand the full intent and I do give this licensing board permission to report my Social Security number to the appropriate professional association or licensing board.

Signature of Applicant:

Date:

Section 10: Certification Statement

By signing below, I verify that this form is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information pursuant to 18 Pa. C.S. §4911.

Additionally, I certify that the statements in this application are true and correct to the best of my knowledge, information and belief, and that I am of good moral character. I understand that any false statement made is subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities and may result in the suspension or revocation of my license or certificate.

Signature of Applicant:

Date:

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If ANY supporting application materials and/or documents are received by PCS postmarked AFTER the application deadline (as established by §37.16 of the Regulations of the Board) your application will be considered for the NEXT examination administration.

Every *fully complete* (all required items are postmarked by the application deadline) application that is received by PCS will be guaranteed at least ONE application review by the Board office, per examination administration. If any application discrepancies are noted by the Board office when your application is reviewed, you will be notified in writing by the Board office (you will be sent a "discrepancy letter"); any response to a discrepancy letter that you may be sent will be considered an application re-evaluation and each response will be reviewed *in the date order it was received* only **AFTER** every examination application that was appropriately received by the application deadline has had at least ONE initial review. Requested examination administration dates **are not guaranteed**.

It is the responsibility of the applicant to provide ALL of the information requested on the application form, additionally, it is the responsibility of the applicant to stay in touch with references, colleges/universities, other licensing jurisdictions, court offices etc... to ensure that ALL required paperwork and/or documentation is being forwarded to the PCS by the application deadline date.

AMPLIFIED RECORD OF ENGINEERING WORK EXPERIENCE FOR PE EXAM

(Duplicate this blank page to provide sufficient extra pages to adequately document your experience. ONLY information presented on this form will be considered.)

Employment Number (1, 2, 3, etc.)	List NAME & ADDRESS of Supervising Official thoroughly familiar with each employment. (If licensed, indicate "PE" after name.)	Dates of Engineering Employment (All time frames must be accounted for and include the <u>month and year</u> . Do NOT use "Present" as your end date.)		PREPARATION INSTRUCTIONS – READ & FOLLOW DIRECTIONS CAREFULLY 1. Applicants must show at least 4 years of PROGRESSIVE experience gained under the supervision of a licensed Professional Engineer, AFTER the issuance of the EIT certificate and prior to initial licensure. 2. List employers in <u>chronological order</u> with the oldest employment shown as Number 1. 3. Show name and address of each employer and the title of your position. 4. For each employer describe in <u>detail</u> the work you performed and your specific role(s). Applicants with insufficient information will be requested to revise and resubmit the forms. 5. DO NOT INCLUDE POST-BACCALAUREATE DEGREE INFORMATION ON THIS FORM 6. <u>Each page</u> of the record MUST include your PRINTED NAME and DATE as well as all other requested information. Your signature is required on the LAST page of each engagement, along with the totaled experience for that engagement. 7. List Work Experience section in the following format: (a) Title of Position (b) Name and Address of Employer (c) Description of Work – Must be accurate, detailed, all-inclusive and indicate character of work and degree of responsibility.	# of Years & Months Areas of Experience Must equal length of time employed		
		From Mo/Yr	To Mo/Yr	In Design		In Other Engineering Work	
				Yrs	Mos	Yrs	Mos
	Supervisor's Name: Supervisor's Address:			Engineering Work Experience Description: Work Experience MUST be listed in a yearly format with no more than one year of experience per page ; however, you may use <u>more than one page</u> for a single year of work experience; there is no maximum number of pages allowed .			
Print Name (EACH PAGE):		Signature (Last Page Of Each Engagement):		Date(EACH PAGE):	EXPERIENCE (TIME) GAINED WHILE EMPLOYED → (Total Experience on LAST PAGE OF EACH ENGAGEMENT)		



Commonwealth Of Pennsylvania
Department Of State
Bureau of Professional and Occupational Affairs
State Registration Board for Professional Engineers, Land Surveyors and Geologists
P. O. Box 2649
Harrisburg, PA 17105-2649

Amplified Record of Engineering Work Experience Requirements

To assist the Board with providing the most appropriate evaluation of your engineering work experience, you must submit an “Amplified Record of Engineering Work Experience” form (amplified record), which has been **completed in its entirety** (names, addresses, complete employment dates- *NOT to “present”* etc...) and provides the Board with specific, thorough and detailed descriptions of your progressive professional experience in engineering work that you obtained under the supervision of a licensed professional engineer (or similarly qualified engineer of a grade or character to fit him to assume responsible charge of the work involved in the practice of engineering), after the issuance of your Engineer-In-Training (EIT) certificate and prior to initial licensure.

The amplified record must clearly describe the supervised engineering work that you personally performed; delineate your role in any group engineering activity; provide an overall description of the nature of work you personally performed and specifically indicate how your engineering skills and responsibilities have progressively increased during your years of experience and must demonstrate conclusively the years of progressive professional experience you have obtained (*including detailed examples of how engineering knowledge and engineering principles, including the principles of math and science, were actually employed*) in engineering work of a grade and character to fit you to assume responsible charge of the work involved in the practice of engineering.

Please note that *the only work experience considered during any application review* is the experience information provided on *the amplified record*. Do NOT attach a resume or curriculum vitae in lieu of an Amplified Record of Work Experience form.

Additionally, please note that you should provide no more than **one year of work experience per page** of the amplified record; however, you may use as many pages as necessary to accurately describe each year of experience.

REFERENCE INFORMATION FORM CHECKLIST

A. Applicant Check List:

1. Please review all Reference requirements in the Board's Regulations (§37.32 for Engineers, §37.37 for Geologists and §37.48 for Surveyors).

Applicants for the **PE exams, licensure**, or the **FE exam (based upon work experience)** must have at least 3 licensed Professional Engineers as references; however, **all work experience must be supported by a Reference Information Form submitted by the licensed professional engineer who supervised the work experience.**

Applicants for the **PS &/or PLS exams, licensure**, or the **FS exam (based upon work experience)** must have at least 3 licensed Professional Land Surveyors as references, the other 2 may be licensed professional engineers; however, **all work experience must be supported by a Reference Information Form submitted by the licensed professional land surveyor who supervised the work experience.**

Applicants for the **FG &/or PG exams or licensure** must provide references from 3 licensed Professional Geologists or unlicensed geologists who are qualified to evaluate the training and experience; however, **all work experience must be supported by a Reference Information Form submitted by the licensed professional geologist who supervised the work experience**

Applicant MAY NOT be related to **any** reference. References MUST have *personal knowledge of your experience* and collectively be able to attest to the entire amount of required experience.

Attach this checklist to each Reference Form provided to your references.

Reference Information Forms submitted by the applicant with the application will be REJECTED.

- ☐ 1. Fill in your name and address at the top of the Reference Information Form.
- ☐ 2. Write in what you are applying for i.e. FE, PE, FS, PS &/or PLS, FG &/or PG Exam(s), Type of licensure (if you have already passed ALL required exams).

B. Reference Check List:

The applicant is required to furnish evidence of qualification for registration for the category checked below. You are asked to attest to the applicant's character, ability, reputation and professional skills and attainments. Be assured that the Board will hold all information strictly confidential.

- ☐ 1. Provide a response for all questions on the Reference Information Form. Forms without all questions answered (and explanations provided, as necessary) will be REJECTED.
- ☐ 2. Sign and date at the bottom of Page 2.
- ☐ 3. References without a professional license must attach a copy of their resume to this form before mailing.
- ☐ 4. *** **Return the original completed Reference Information Form in a sealed envelope bearing your signature across the seal, to the appropriate location (as noted below):**

For FE/PE Exam Applicants, mail directly to: PCS, PO Box 198728, Nashville TN 37219

For all other applicants (Geologists (FG, PG), Surveyor (FS, PS, PLS Exam) or Non-Examination Engineer), mail directly to Engineer Board, PO Box 2649, Harrisburg, PA 17105

The fully completed Reference Information Form **MUST** be returned directly to the appropriate office from the reference, as noted in item 4 (above).

DO NOT RETURN THE REFERENCE INFORMATION FORM TO THE APPLICANT

REFERENCE INFORMATION FORM

Applicant's Name:					Applying for:				
Address:				City:		State:		Zip:	
<u>ALL OF THE FOLLOWING MUST BE COMPLETED BY THE REFERENCE:</u> Must be typed or completed in black ink – If ALL Information is not provided, the form is not considered complete									
1. Name:		LAST				FIRST			MI
2. Address:		Street							
		City			State			Zip	
3. Business Phone (8 AM - 5 PM):						-			
						-		Ext.:	
4. E-Mail Address:									
5. What is your present business or profession:									
6. If in individual practice, please indicate nature of such practice.									
7. What is your area of expertise (discipline)?									
8. Are you a Licensed <input type="checkbox"/> Engineer <input type="checkbox"/> Surveyor <input type="checkbox"/> Geologist? <input type="checkbox"/> None If "none", you must submit a detailed resume or curriculum vitae.						License #			
						State:		Exp. Date	
9. How long have you known the applicant?				From		to		inclusive.	
				Do not use "present"					
10. Did/Do you provide direct supervision over the applicants work?						<input type="checkbox"/> Yes <input type="checkbox"/> No If "No", provide a detailed explanation below (use a separate page if necessary):			
11. Did/Do you have review and approval authority over the applicants work?						<input type="checkbox"/> Yes <input type="checkbox"/> No If "No", provide a detailed explanation below (use a separate page if necessary):			
12. Are you in any way related to applicant?				<input type="checkbox"/> Yes <input type="checkbox"/> No					
13. Do you know of anything reflecting adversely on the integrity, morals or general good character of the applicant?				<input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", provide a detailed explanation below (use a separate page if necessary)					

14. Does the applicant read, write, and speak the English language intelligibly?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Was the applicant assigned tasks and duties with increasing responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No If “No”, provide a detailed explanation below (use a separate page if necessary):
16. Is applicant’s experience of a grade or character to allow applicant to assume sole responsible charge of the work involved in the practice of the profession?	<input type="checkbox"/> Yes <input type="checkbox"/> No If “No”, provide a detailed explanation below (use a separate page if necessary)
17. Do you recommend the applicant for certification or licensure?	<input type="checkbox"/> Yes <input type="checkbox"/> No If “No”, provide a detailed explanation below (use a separate page if necessary):
18. Focusing on the applicant’s ability to utilize the principles and practice of their profession, provide a description of what you think are the applicant’s qualifications. (use a separate page if necessary)	
19. Does the applicant consistently demonstrate a professional attitude in his/her work?	<input type="checkbox"/> Yes <input type="checkbox"/> No If “No”, provide a detailed explanation (use a separate page if necessary):
<p>I _____ certify to the accuracy of the above statements</p> <p style="text-align: center;">Print your name</p> <p>Signature: _____ Date: _____</p>	

VERIFICATION OF EXAMINATION / REGISTRATION

Pennsylvania State Registration Board for Professional Engineers, Land Surveyors and Geologists

Mailing Address:
PCS Attn: PA PE
P.O. Box 198728
Nashville, TN 37219

Courier Address:
PCS Attn: PA PE
150 Fourth Avenue N.
Suite 800
Nashville, TN 37219

This form WILL NOT be accepted electronically OR from the applicant.

INSTRUCTIONS

It is the responsibility of the applicant to request the necessary verification(s) from **every State Board and/or Licensing Jurisdiction** you have ever *passed a certification and/or licensure examination in or have ever been granted certification or licensure* (regardless of the current status).

After completion, this form must be **mailed** to the PCS **directly from the Verifying State or Jurisdiction**.
(You may duplicate this form as much as necessary.)

DO NOT provide the verifying Board an envelope with **YOUR** return address **OR** business letterhead/return address.

THIS PORTION TO BE COMPLETED BY APPLICANT

TO: (State Board Completing Form)

(Name of Applicant)

(Street Address)

(City)

(State)

(Zip)

(Social Security Number)

(Date of Birth)

THIS PORTION TO BE COMPLETED BY STATE BOARD

I. The above named person was certified or registered as:

- ☐ Engineer-in-Training
☐ Professional Engineer
☐ Surveyor-in-Training
☐ Prof. Land Surveyor

Certificate Number

Date Issued

Valid Until

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

II. Disciplinary Actions: ☐ Yes ☐ No

If "Yes", please provide certified copies of action

III. Basis of Registration:

Written Examination

- ☐ Fund. Of Engineering (EIT)
☐ Princ. & Pract. of Engineering (PE)
☐ Fund. Of Land Surveying (SIT)
☐ Princ. & Pract. Of Land Surveying (PLS)
Other Specify: _____

of
Hrs.

Results
(P/F/Score)

NCEES Exam
(Yes/No)

Exam Date

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

☐ **Oral Examination** _____ hrs. PE _____ hrs. LS Date: _____

☐ **Comity with:** (1) _____ (2) _____

☐ **Education and Experience:** If licensed with less than 8 years of experience including graduation from ABET engineering curriculum, please check here ☐ and attach a detailed written description of qualifications and basis for licensure.

Signature and Title: _____

Board: _____ **Date:** _____

(Board Seal)