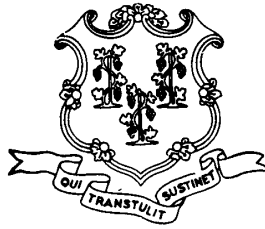


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
Occupational & Professional Trades Division
450 Columbus Boulevard, Ste 901
Hartford, CT 06103
Email: dcp.occupationalprofessional@ct.gov
Web site: www.ct.gov/dcp



Professional Engineer & Land Surveyor License Application Instructions

Failure to follow directions will result in the delay in the processing of your application.

It is the policy of the Board to assess the qualifications of each applicant against the Model Law as written by the National Council of Examiners for Engineers and Land Surveyors (NCEES).

I. General Information

Applicants applying for the Professional Engineering and/or Engineer-In-Training exams must have met the experience requirements at the time of application.

The Board no longer waives the Fundamentals of Engineering exam. Therefore, any classes described in the Board's Rules & Regulations regarding the waivers of these exams, only refers to those individuals who have passed these exams and those whose EIT registrations may have expired.

Applicants applying for reciprocity by comity must show proof of passing the Fundamentals of Engineering and the Principles of Practice of Engineering written exams. The Board will not approve applicants who have not passed both exams.

Please be sure to make a copy of your application package for your records, the Board will not provide copies in the future.

II. Deadlines

Any application that does not meet the Board deadlines will be deferred for consideration to the next examination date. It is the applicant's responsibility to verify the receipt of all documents by the Board office.

April Examination - The application deadline for the April examination is December 1st of the prior year. All documents supporting your application must be received by December 31st in order to be considered for this examination. Applications that are not complete by this date will be considered for the next examination.

October Examination - The application deadline for the October examination is July 1st of the same year. All documents supporting your application must be received by July 31st in order to be considered for this examination. Applications that are not complete by this date will be considered for the next examination.

Reciprocity/Comity Applications

Applications and supporting documents must be in the Board office no later than 10 days prior to the Board's scheduled meeting. (Meeting dates are listed on the Department's web site at www.ct.gov/dcp)

III. Photograph

Applicants are required to attach a photograph approximately 2 ¼" by 2 ¼" "with your signature on the front. The photograph shall have been taken within six months of filing the application.

IV. Affidavit

All applications must be notarized.

V. Education

Indicate the degree(s) received and the year(s) you graduated. Class 9s & 10s applicants need proof of expected date of graduation. It is your responsibility to request this information and send it directly to the Board office. (Verification of Education form)

Foreign Institutions

All applicants applying for the exams must have their foreign degrees reviewed by one of the evaluation services selected by the Board:

NCEES (National Council of Examiners for Engineering & Surveying - Center for Professional Engineering Education Services) 280 Seneca Creek Rd, Seneca SC 29678
Telephone: (800) 464-7650 Web Site: www.ncees.org or www.cpees.org

Please note that those applying for the Fundamentals of Engineering Exam who hold a foreign undergraduate degree and a US graduate degree in engineering may apply under Class 9 without an evaluation.

Reciprocity/Comity applicants with foreign undergraduate degrees must show evidence of their degree by providing the documentation that was submitted to the original state of licensure.

VI. Verification of Examinations

All applicants who have passed any portion of the NCEES exams in another state or jurisdiction must have that information verified in writing. It is your responsibility to request this information and have it sent to the Board office. (Verification of Registration form)

Those who have passed the Fundamentals of Engineering Exam in Connecticut should include the exam information on the application. (Registration/License Status (D))

VII. Reciprocity/Comity Applicants

Please note that applicants who hold an engineering degree, must provide proof of passing the Fundamentals of Engineering (FE) and Principles & Practice of Engineering (PPE) written exams and hold a current license in another state and have experience acceptable to the Board to be eligible for consideration for reciprocity under Class 4.

If you hold a current National Council of Examiners for Engineering & Surveying (NCEES) Record, you need only to complete pages one, two and affix your photograph and complete the affidavit on the last page of the application. It is the applicant's responsibility to contact NCEES to forward your record.

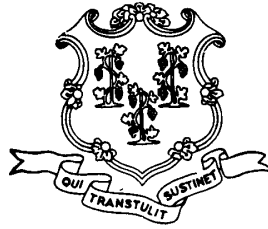
If you do not hold a NCEES Record, you must complete the entire application and have all the proper documentation forwarded to the Board office.

Your application must be consistent with Connecticut's requirements at the time of license.

VIII. Review of applications for the engineering exams

Completed applications are presented to the Board at their scheduled meetings for review. Applicants who are approved will be notified along with examination information. Please note that the examinations are administered by a testing service under contract with the Connecticut Board. When you receive your letter of approval, you will also receive instructions regarding the scheduling and the listing of additional fees for the upcoming examinations.

STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 Occupational & Professional Trades Division
 450 Columbus Boulevard, Ste 901
 Hartford, CT 06103
 Email: dcp.occupationalprofessional@ct.gov
 Web site: www.ct.gov/dcp



For Official Use Only

Professional Engineer & Land Surveyor License Application

I hereby apply for: (Note, if you are applying in a Professional Engineer or Land Surveyor Class, do not check any Engineer-In-Training or Land Surveyor-In-Training Classes). **Please note that the definitions of the classes are listed in the Rules & Regulations of the Board.** This application must be accompanied by a check made payable to "Treasurer, State of Connecticut."

Please check (✓) one:

For Exam:

Professional Engineer Application Fee: \$80.00	Land Surveyor Application Fee: \$80.00	Combined Professional Engineer & Land Surveyor Application Fee: \$80.00	Engineer In-Training Application Fee: \$76.00	Land Surveyor In-Training Application Fee: \$64.00
<input type="checkbox"/> Class 1 <input type="checkbox"/> Class 1A <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3	<input type="checkbox"/> Class 5 <input type="checkbox"/> Class 6 <input type="checkbox"/> Class 7	<input type="checkbox"/>	<input type="checkbox"/> Class 9 <input type="checkbox"/> Class 9s <input type="checkbox"/> Class 10 <input type="checkbox"/> Class 10s	<input type="checkbox"/> Class 12 <input type="checkbox"/> Class 13 <input type="checkbox"/> Class 14 <input type="checkbox"/> Class 14A

For Reciprocity/Comity:

Professional Engineer Application Fee: \$190.00	Land Surveyor Application Fee: \$190.00	Combined Professional Engineer & Land Surveyor Application Fee: \$190.00	Engineer In-Training Application Fee: \$76.00	Land Surveyor In-Training Application Fee: \$64.00
<input type="checkbox"/> Class 4	<input type="checkbox"/> Class 8 (2hr State Exam)	<input type="checkbox"/>	<input type="checkbox"/> Class 11	<input type="checkbox"/> Class 15

Personal Information:

First Name		Middle Initial	Last Name
Social Security Number	Date of Birth	Place of Birth (City; State; Country)	
Maiden Name or Previous Last Name			
Citizenship/Immigration Status (check (✓) one)			
<input type="checkbox"/> US Citizen <input type="checkbox"/> Alien lawfully admitted for permanent residence in US <input type="checkbox"/> Other immigration status			
If you are not a US citizen, attach a copy of your alien registration card (front and back) or other documentation issued by the Bureau of Citizenship and Immigration Services (BCIS)			

Addresses: Preferring Mailing Address (check (✓) one) Home Company/School

Home Street Address or PO Box		City	State	Zip Code
Telephone Number (with area code)	Email Address			
Name of Company or School				
Street Address or PO Box		City	State	Zip Code
Telephone Number (with area code)	Email Address			

Personal Signatures of Endorsers

Signatures required below are as follows:

Application for Professional Engineer: At least five (5) persons of whom at least four (4) shall be members of your profession and not related to you and at least one (1) who is listed in the Experience Record Section. At least three (3) must also be licensed Professional Engineers in the United State or its territories.

Application for Land Surveyor: At least five (5) persons of whom at least four (4) shall be members of your profession and not related to you and at least one (1) who is listed in the Experience Record Section. At least three (3) must be licensed Land Surveyors in the United States or its territories.

Application for Combined Professional Engineer and Land Surveyor: At least five (5) persons of whom at least four (4) shall be members of your profession and not related to you and at least one (1) attesting to your engineering experience and one (1) attesting to your surveying experience and listed in the Experience Record Section. At least two (2) must be licensed Professional Engineers and at least two (2) must be licensed Land Surveyors in the United States or its territories.

Application for Engineer-in-Training: Class 10 - same as for Professional Engineer. Class 9, 9S, 10S or 11, list the names of the last three (3) persons familiar with your education or experience, signatures are not required for Class 9 or 11 or for senior students in Connecticut Schools in the last semester of an engineering curriculum.

Application for Land Surveyor-in-Training: Class 13 and 14 - same as for Land Surveyor. Class 12 or 15, list the names of the last three (3) persons familiar with your education and experience, signatures are not required for Class 12 or 15 or for senior students in the in last semester of a surveying curriculum.

By signing below, you are endorsing the applicant and stating that the applicant has used knowledge and experience in his or her own professional development so that he or she now qualifies in competency and judgment for consideration for licensure as indicated above.

Printed Name & Signature	Contact Information	State in which Licensed & Number	Association to Applicant & Date
(1) Name	Telephone Number (with area code)	State	Association
Signature	Email Address	License Number	Date
(2) Name	Telephone Number (with area code)	State	Association
Signature	Email Address	License Number	Date
(3) Name	Telephone Number (with area code)	State	Association
Signature	Email Address	License Number	Date
(4) Name	Telephone Number (with area code)	State	Association
Signature	Email Address	License Number	Date
(5) Name	Telephone Number (with area code)	State	Association
Signature	Email Address	License Number	Date

AFFIDAVIT

The undersigned being duly sworn, upon his oath deposes and says that all information contained in this application to the best of his/her knowledge and belief are true and made in good faith.

Signature of Applicant

Date

Subscribed and sworn to before me, this _____ day of _____ 20 _____

Signature of Notary Public, Justice of the Peace, Commissioner of Superior Court

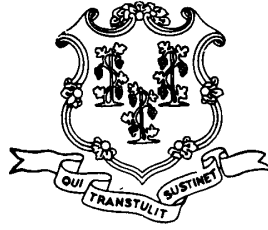
My Commission Expires

Picture

Insert passport type of photo approximately 2 1/4" x 2 1/4" in size showing full front view in plain, light background taken within six months of date submitted.

Front of photograph must bear the signature of applicant and be taped securely on edges with clear tape.

STATE OF CONNECTICUT
 DEPARTMENT OF CONSUMER PROTECTION
 Occupational & Professional Trades Division
 450 Columbus Boulevard, Ste 901
 Hartford, CT 06103
 Email: dcp.occupationalprofessional@ct.gov



Verification of Registration or Examination

To: (Board Making Certification)

Name			
Street Address	City	State	Zip Code

Name of State Completing Form:

Name of State	Date
---------------	------

Name of Applicant

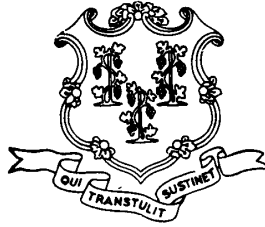
First Name	Middle Initial	Last Name	
Street Address	City	State	Zip Code
Social Security Number	Date of Birth		

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

<input type="checkbox"/> Professional Engineer	Certificate Number	Date Issued	Valid Until	Date Applied
<input type="checkbox"/> Engineer-in-Training	Certificate Number	Date Issued	Valid Until	Date Applied
<input type="checkbox"/> Land Surveyor	Certificate Number	Date Issued	Valid Until	Date Applied
<input type="checkbox"/> Land Surveyor-in-Training	Certificate Number	Date Issued	Valid Until	Date Applied

II. Written Examination

<input type="checkbox"/> Professional Engineer	Hours	Results (Pass/Fail Grade)	NCEES Exam	Exam Date
<input type="checkbox"/> Engineer-in-Training	Hours	Results (Pass/Fail Grade)	NCEES Exam	Exam Date
<input type="checkbox"/> Land Surveyor	Hours	Results (Pass/Fail Grade)	NCEES Exam	Exam Date
<input type="checkbox"/> Land Surveyor-in-Training	Hours	Results (Pass/Fail Grade)	NCEES Exam	Exam Date
<input type="checkbox"/> Other	Hours	Results (Pass/Fail Grade)	NCEES Exam	Exam Date



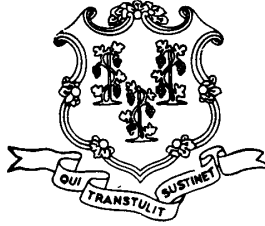
Supplemental Breakdown of Surveying Experience

Instructions:

Land Surveyor and Land Surveyor-in-Training applicants **must** complete this form in addition to the “Experience Record.”

Time Period		Property Line Experience	Time Spent	
			As Subordinate	In Responsible Charge
From	To	Field Work	Year/Month	Year/Month
		Rod Person		
		Instrument Person		
		Party Chief		
		Records Research		
From	To	Office Work	Year/Month	Year/Month
		Note Reduction		
		Plotting & Drafting		
		Property Line Calculations		
		Subdivision Layout		
		Preparation of Description		
		Supervision		
From	To	Other than Property Line Experience	Year/Month	Year/Month
		Control Surveys (including Photogrammetric)		
		Construction Layout		
		Geodetic Work		
		Control Surveys		
		Topographic Surveys		
		Highway & Easement Surveys		
		Other		
Application is incomplete if totals are not shown			TOTALS:	

STATE OF CONNECTICUT
 DEPARTMENT OF CONSUMER PROTECTION
 Occupational & Professional Trades Division
 450 Columbus Boulevard, Ste 901
 Hartford, CT 06103
 Email: dcp.occupationalprofessional@ct.gov



Verification of Education

➤ **Candidates must complete this form prior to submitting to your Registrar.**

First Name	Middle Initial	Last Name		
Street Address		City	State	Zip Code
Social Security Number	Date of Birth	Email Address		

Record of Graduation

➤ Registrar's Office must provide the information requested below and return the completed form to the person named above. **Transcripts are only required for land surveyor applicants.**

This is to certify that:

Name of Graduate				
<input type="checkbox"/> was graduated on _____ or <input type="checkbox"/> expects to graduate on _____				
Name of College or University				
Street Address		City	State	Zip Code
Indicate Type of Degree and Major & Curriculum				

Certified By:

Name of Registrar		Affix School Seal (Mandatory)
Signature of Registrar	Date	