

OHIO'S STATE BOARD OF REGISTRATION FOR PROFESSIONAL ENGINEERS AND SURVEYORS
PE exam approval application 2011 October **1011-PE**

Registration qualifications

This PE examination approval application is **ONLY** for candidates who are applying to take an NCEES Principles and Practice of Engineering examination for the first time in Ohio. Registration qualifications can be found in Ohio R.C. section 4733.11 through section 4733.13 and Ohio A.C. section 4733-9. Your initials are required in several locations, and a notarized affidavit is required on Page 4. **An incomplete application cannot be reviewed and will be returned.**

<< Your initials indicate that you have read the registration qualifications.

\$75.00 nonrefundable application fee

An application and fee is required for each exam cycle. A \$75.00 nonrefundable application fee, using check or money order; and made payable in U.S. funds to **Treasurer, State of Ohio**; is required by Ohio R.C. section 4733.12, section 4733.13 and Ohio A.C. section 4733-19.

<< Your initials indicate that you understand the nonrefundable application fee is required by Ohio law and that the Board only accepts check or money order. **Applications including cash will be returned.**

Photograph

Your **REQUIRED** photograph must be securely attached within this 2" by 2" space.

Passport, or passport-style, photo is requested.

Required, by Ohio A.C. section 4733-17, is a **permanent print** of your recognizable face not less than 3/4" wide.

Contact, personal information READ DISCLOSURE STATEMENT, PRIVACY NOTICE ON PAGE 2

The Board requires your full name as it will officially appear on any subsequent certificate of registration. **IMPORTANT!** We must assume your name is in traditional U.S. order — first, middle, last. Initials may be used. Your name on this application, and any subsequent NCEES-administered examination registration, must be the same.

YOUR FULL NAME IN TRADITIONAL U.S. ORDER — FIRST, MIDDLE, LAST — INITIALS MAY BE USED

SUFFIX

MAILING ADDRESS LINE 1
P.O. Box is NOT acceptable

U.S. SOCIAL SECURITY NUMBER
REQUIRED by Ohio R.C. section 3123.50

MAILING ADDRESS LINE 2 >> **ONLY if needed**

BIRTH DATE >> **MM/DD/YYYY**

CITY

COUNTY >> **REQUIRED if Ohio address**

U.S. 2-DIGIT STATE, ZIP+4

CANADA 2-DIGIT PROVINCE, POSTAL CODE

COUNTRY >> **ONLY if not U.S. or Canada**

EMAIL ADDRESS

TELEPHONE

Higher education OHIO A.C. SECTION 4733-17

IMPORTANT! Non-ABET degrees must be evaluated before applying for an exam approval. Go to www.peps.ohio.gov for Board policy and degree evaluation information. Credit claimed must be supported by an official transcript from the institution. Applications filed without original transcripts cannot be reviewed until transcripts are received. Applications filed with non-ABET degrees cannot be reviewed without receiving a degree evaluation.

INSTITUTION College or university	FROM MM/YY	TO MM/YY	GRADUATED MM/YY	DEGREE EARNED Engineering degree ONLY
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 50%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

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Engineering exam, licensure information PES 1013-OH REQUIRED FOR NON-OHIO EXAM, LICENSE

FE exam

STATE	EXAM DATE >> MM/DD/YYYY	E.I. CERTIFICATE NUMBER*
<input type="text"/>	<input type="text"/>	<input type="text"/>

Current P.E. licensure LIST NO MORE THAN 3

STATE	P.E. CERTIFICATE NUMBER	EXP. DATE >> MM/DD/YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

PE exam

STATE	EXAM DATE >> MM/DD/YYYY	P.E. CERTIFICATE NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>

PE EXAM DISCIPLINE

*NOTE: E.I. and S.I., formerly E.I.T. and S.I.T., are Ohio's abbreviations for Engineer Intern and Surveyor Intern. Some states, including Ohio, do not issue E.I. or S.I. numbers.

Surveying exam, licensure information PES 1013-OH REQUIRED FOR NON-OHIO EXAM, LICENSE

FS exam

STATE	EXAM DATE >> MM/DD/YYYY	S.I. CERTIFICATE NUMBER*
<input type="text"/>	<input type="text"/>	<input type="text"/>

Current P.S. licensure LIST NO MORE THAN 3

STATE	P.S. CERTIFICATE NUMBER	EXP. DATE >> MM/DD/YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

PS exam

STATE	EXAM DATE >> MM/DD/YYYY	P.S. CERTIFICATE NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>

References OHIO R.C. SECTION 4733.12

List 5 persons, at least 3 of whom are registered engineers, from whom the Board may request information in regard to your character, experience and professional ability. Do not name your relatives or members of this Board.

1	NAME	BUSINESS RELATIONSHIP	P.E./P.S. REGISTRATION Number	State
	<input type="text"/>		<input type="text"/>	<input type="text"/>
	ADDRESS	OCCUPATION		
<input type="text"/>		<input type="text"/>		
2	NAME	BUSINESS RELATIONSHIP	P.E./P.S. REGISTRATION Number	State
	<input type="text"/>		<input type="text"/>	<input type="text"/>
	ADDRESS	OCCUPATION		
<input type="text"/>		<input type="text"/>		
3	NAME	BUSINESS RELATIONSHIP	P.E./P.S. REGISTRATION Number	State
	<input type="text"/>		<input type="text"/>	<input type="text"/>
	ADDRESS	OCCUPATION		
<input type="text"/>		<input type="text"/>		
4	NAME	BUSINESS RELATIONSHIP	P.E./P.S. REGISTRATION Number	State
	<input type="text"/>		<input type="text"/>	<input type="text"/>
	ADDRESS	OCCUPATION		
<input type="text"/>		<input type="text"/>		
5	NAME	BUSINESS RELATIONSHIP	P.E./P.S. REGISTRATION Number	State
	<input type="text"/>		<input type="text"/>	<input type="text"/>
	ADDRESS	OCCUPATION		
<input type="text"/>		<input type="text"/>		

OHIO'S STATE BOARD OF REGISTRATION FOR PROFESSIONAL ENGINEERS AND SURVEYORS
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Disciplinary actions OHIO R.C. SECTION 4733.20

FELONY, MORAL TURPITUDE Have you been convicted, found guilty, pled guilty or received treatment in lieu of conviction for a felony or any offense involving moral turpitude in Ohio or another U.S. state or jurisdiction?

No Yes If **YES**, provide a written statement, signed and dated, explaining the incident(s) and attach statement(s) and supporting documentation to this application. Documentation should include, but is not limited to, court and police records.

LICENSE, REGISTRATION Have you had a disciplinary action involving a professional or vocational license, or registration, or had an application for the same denied in Ohio or another U.S. state or jurisdiction?

No Yes If **YES**, provide a written statement, signed and dated, explaining the incident(s) and attach statement(s) and supporting documentation to this application.

Disclosure statement, privacy notice

Ohio's State Board of Registration for Professional Engineers and Surveyors is requesting disclosure of information that is necessary to accomplish our statutory purpose as required by Chapter 4733 of the Revised Code and Administrative Code. Failure to provide required information may result in your application approval being delayed or your application being returned.

Most documents and records maintained by the state of Ohio are public records under Ohio law. This means that information submitted to us from you may be subject to disclosure if there is an official public records request. **EXCEPTIONS:** Your U.S. social security number and any college transcripts submitted to the Board are **NOT** public records and cannot be released through a public records request.

<< Your initials indicate that you have read the disclosure statement, privacy notice.

Notarized affidavit OHIO R.C. SECTION 4733.09

STATE OF

AFFIANT

I, _____,
being the duly sworn, or affirmed, applicant say that my statements in this application are true to the best of my knowledge and belief.

AFFIANT SIGNATURE

DATE SIGNED

NOTARY

Subscribed and sworn, or affirmed, to me this

_____ day of _____, _____.

Witness my hand and seal hereon.

NOTARY SIGNATURE

MY COMMISSION EXPIRES



Deliver completed **PE exam approval application** with fee to:

2011 OCTOBER PE EXAM APPROVAL
OHIO ENGINEERS AND SURVEYORS BOARD
50 W BROAD ST STE 1820
COLUMBUS OH 43215-5905

Questions?

EMAIL
pes.board@pes.ohio.gov

FAX
(614) 728-3059

U.S. TOLL FREE
(877) 644-6364

Licensure, examination verification request

1013-OH

TO BE COMPLETED BY APPLICANT

NAME

U.S. SSN
 Last 4 ONLY

BIRTH DATE >> MM/DD/YYYY

REQUESTED BY:

REQUESTED FROM >> U.S. BOARD

VERIFICATION REQUEST
 ENGINEERS AND SURVEYORS BOARD
 50 W BROAD ST STE 1820
 COLUMBUS OH 43215-5905

APPLICANT ADDRESS

REQUESTING VERIFICATION FOR:

- E.I. S.I. P.E. P.S.

TO BE COMPLETED BY 'REQUESTED FROM' U.S. BOARD Applicant is certified or registered as:

	CERTIFICATE NUMBER	ISSUED >> MM/DD/YYYY	VALID UNTIL >> MM/DD/YYYY
<input type="checkbox"/> E.I. Engineer Intern	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> S.I. Surveyor Intern	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> P.E. Professional Engineer...	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> P.S. Professional Surveyor...	<input type="text"/>	<input type="text"/>	<input type="text"/>

Licensure method Applicant is certified or registered by:

		HOURS	RESULTS	NCEES		EXAM DATE >> MM/DD/YYYY
				YES	NO	
<input type="checkbox"/> Written examination	FE	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	FS	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	PE	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	PE exam discipline	<input type="text"/>				
	PS	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/> Oral examination		<input type="text"/>	PE hours	<input type="text"/>	PS hours	
<input type="checkbox"/> Other	<input type="text"/>					

Has disciplinary action been taken against applicant?

- NO YES >> IF YES, PLEASE INCLUDE SOURCE OF SUPPORTING DOCUMENTATION

Verified by:

PRINTED NAME, TITLE

SIGNATURE

DATE

