COMMONWEALTH OF KENTUCKY

Action	
(Date of Action) Action	_
(Date of Action) Action	_
(Date of Action)	_
License No.	_
(Section of Law) , (Effective Date)	_



APPLICATION FOR REINSTATEMENT TO THE PRACTICE OF PROFESSIONAL LAND SURVEYING IN KENTUCKY

Kentucky State Board of Licensure for Professional Engineers and Land Surveyors 160 Democrat Drive Frankfort, Kentucky 40601 502/573/2680 800/573/2680



 $REINSTATEMENT — Enclose \$500.00 \ check \ or \ money \ order \ payable \ to \ "Kentucky State \ Treasurer" \ as \ a \ non-refundable \ application \ fee.$

__ Date _____

Instructions: Answer all questions in this application truthfully and completely.

Full Name (as it originally appeared on your certificate of licensure)

I. PERSONAL DATA:

1.

(First)	(Middle) (Las				
2. Application Date:	3. NCEES ID number:				
4. Last four of your Social Security No	5. Date of Birth:				
Place * in parenthesis at address you wish the Board	<u>-</u>				
6. Business Address ()	7. Residence Address ()				
	7. Residence Address ()				
6. Business Address ()	7. Residence Address ()				

Certificate Number _____

13. Do you hold	l a valid license to practice Professional Land	Surveying i	n any State	or Territory?	
Yes	No If yes, what State		PL	S No./Expiration Da	te
14. Do you hold	l a valid license to practice Professional Engin	neering in ar	ny State or '	Territory?	
Yes	No If yes, what State		PE	E No./Expiration Date	2
15. (a) Have yo	u ever been refused or denied a license?				
•	u ever been disciplined by a professional lice disciplinary action*? If YES to any of the abo			· · · · · · · · · · · · · · · · · · ·	•
violation o license, Se	'disciplinary action' means any final written decision or f the board's laws or rules. Disciplinary actions include ttlement Agreements or Consent Orders, probation, susport been convicted of a felony?	reprimands, ad ension, revocat	ministrative fi	nes, the board's refusal to mbination of these.	issue, restore, or renew a
10. Have you ev	ref been convicted of a felony:	No ii yes, e	жріані		
	een adjudged mentally incompetent by a court	_			No If yes, explain: No If yes, explain:
II. EDUCATI	ON HISTORY:				
	Name and Address of Institution	Years A		Date of Graduation	Course Completed or Degree Conferred
High School or Preparatory Education		From	То	Graduation	Degree Comerce
College or University					

Make copies of this page if you need additional space. III. **EXPERIENCE**:

<u>e</u>			Time - Years, in decimal tenths.					
Dates, Month - Year, From - To	Title of Position, Name of Employer, Description of Experience. List all work experience chronologically, with no gaps, from the time you originally became licensed until the date of this application.	(1) Non-Surveying Experience	(2) Academic	(3) Surveying experience prior to college graduation	(4) reying street and several s	(5) Professional Surveying experience after PLS	Name, Title, and address of person most familiar with each engagement, preferably a supervisor (Not deceased). Indicate if PLS.
				3 1				
	ing at the point in time when those for whom or with whom you worked considered that d be entrusted to carry out assignments without close day-to-day supervision.							Page Total
								Cumulative Page Totals

IV. REFERENCES:

Name	Address (with Zip code)	Telephone Number
Note: The total of endorsers and personal Surveyors.	al references must be at least five, three of which must be Lic	censed Professional Land
Chapter 18, including the Code of Profession	self with Kentucky Revised Statutes Chapter 322 and with 201 Kentucky Revised Statutes Chapter 322 and with	therein. I do solemnly swear or

Signature of applicant and Date