

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 ENGINEERING 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.

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

I. PERSONAL DATA:

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

(First)

(Middle)

(Last)

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 to use for official Board mailings.

6. Business Address ()

7. Residence Address ()

8. Telephone (daytime): _____

9. Fax Number: _____

10. Cellphone: _____

11. Email address: _____

12. Have you passed the Fundamentals of Engineering exam in any state? [] Yes [] No If yes, what state _____

Certificate Number _____ Date _____

13. Do you hold a valid license to practice Professional Engineering in any State or Territory?

Yes _____ No _____ If yes, what State _____ PE No./Expiration Date _____

14. Do you hold a valid license to practice Professional Engineering in any State or Territory?

Yes _____ No _____ If yes, what State _____ PE No./Expiration Date _____

15. (a) Have you ever been refused or denied a license? _____

(b) Have you ever been disciplined by a professional licensing jurisdiction or voluntarily surrendered a professional license in lieu of a disciplinary action*? If YES to any of the above, explain: _____

*The term 'disciplinary action' means any final written decision or settlement taken against an individual or firm by a licensing board based upon a violation of the board's laws or rules. Disciplinary actions include reprimands, administrative fines, the board's refusal to issue, restore, or renew a license, Settlement Agreements or Consent Orders, probation, suspension, revocation, or any combination of these.

16. Have you ever been convicted of a felony? Yes No If yes, explain: _____

17. Have you been adjudged mentally incompetent by a court of competent jurisdiction? Yes No If yes, explain:

18. Have you ever been discharged from military service other than by Honorable Discharge? Yes No If yes, explain:

II. EDUCATION HISTORY:

Make copies of this page if you need additional space.

III. EXPERIENCE:

Dates, Month - Year, From - To	Time - Years, in decimal tenths.						Name, Title, email address, and address of person most familiar with each engagement, preferably a supervisor (Not deceased). Indicate if PE.
	(1) Non-Engineering Experience	(2) Academic	(3) Engineering experience prior to college graduation	(4) Engineering experience after college graduation	As subordinate	*In Responsible Charge	
*Beginning at the point in time when those for whom or with whom you worked considered that you could be entrusted to carry out assignments without close day-to-day supervision.							Page Total
							Cumulative Page Totals

IV. REFERENCES:

Name	Address (with Zip code)	Email address and Telephone Number

Note: The total of endorsers and personal references must be at least five, three of which must be Licensed Professional Engineers.

I hereby certify that I have familiarized myself with Kentucky Revised Statutes Chapter 322 and with 201 Kentucky Administrative Regulations Chapter 18, including the Code of Professional Practice and Conduct, and do hereby subscribe to the provisions therein. I do solemnly swear or affirm that I understand the instructions and terms in this application form, and that this application is true, correct, and complete to the best of my knowledge.

Signature of applicant and Date