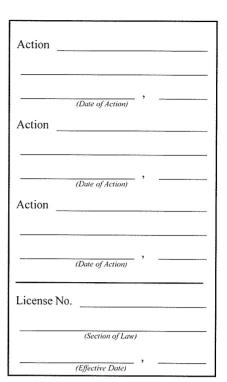
### **COMMONWEALTH OF KENTUCKY**





## STATE BOARD OF LICENSURE FOR PROFESSIONAL ENGINEERS AND LAND SURVEYORS

Kentucky Engineering Center 160 Democrat Drive Frankfort, Kentucky 40601 (502) 573-2680 1/800/573-2680

APPLICATION FOR REINSTATEMENT TO THE PRACTICE OF PROFESSIONAL ENGINEERING IN KENTUCKY

#### APPLICATION INSTRUCTIONS:

If you are a NCEES Record Holder then request NCEES to transmit your record to this Board, complete questions 1-7, 10-14, and sign page 4.

If you are <u>not</u> a NCEES Record Holder, then complete the entire application.

Complete all additional steps as outlined on our website.

7. Date of Birth

#### I. PERSONAL DATA

Business address ( )	(Middle)	(Last)
		(Firm Name)
	(Street and Number)	
(City) E-mail address	(State)	(Zip)
Residence address ( )		
Place * in parenthesis at address	you wish Board to use.	(Zip)
	Social Security No.	
Phone No. Home	Work	
Fax No.	Fax No.	

8. Are you registere						
Name of State or	Country	Field or Branch	Basis*	Licensure Date	Cert. No.	Expiration Date
				Grandfather. Where written exams an state? Yes I N		
			-		10 II yes, what st	atc
. (a) Have you ev	er been ref	used a license?				
(b) If applying f	or examinat	tion, have you ever fa	ailed this exami	nation in any jurisdiction	on?	_
(c) Have you ev	er had disc	iplinary proceedings	against you in	any jurisdiction?		
If YES to any of	the above, p	olease explain				
Have you ever be	en convicte	ed of a felony?	Yes 🔲 No	If yes, explain		
. Have you ever be		ou or a releasy.	105	yes, enplain		
Have you been a	liudged me	ntally incompetent h	y a court of co	npetent jurisdiction?	□ Yes □ No	If yes explain
- Have you occir a	ijuugeu iiie	many meompetent o	y a count of con	inpetent juristiction:	103 2110	ii yes, explain
3. Have you been d	ischarged fr	om a military servic	e other than by	an honorable discharg	e? 🔲 Yes 🔲	No If yes, explain
3. Have you been d	ischarged fr	om a military servic	e other than by	an honorable discharg	e? 🔲 Yes 🔲	No If yes, explain
				an honorable discharge		No If yes, explain
APPLICANTS ON	L <b>Y</b> (		be an EAC/AB		in <b>g</b> degree.)	
APPLICANTS ON	L <b>Y</b> (		be an EAC/AB	ET accredited engineer	in <b>g</b> degree.)	
APPLICANTS ON  First FE exam  (a) SENIOR YEA	LY ( n AR STUDE	Your degree should	be an EAC/AB  ( Takir  credited <b>engine</b>	ET accredited engineer	ing degree.) time in Kent	ucky
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<sup>†</sup> Applicants for original license should have transcript mailed directly to Board by College or University. Transcripts are not required for reciprocity applicants unless specifically requested.

Transcripts issued to applicant will not be accepted.

IMPORIANT: DO NOT FILL IN EXPERIENCE SECTION UNTIL YOU HAVE READ THE INSTRUCTIONS. FAILURE TO FOLLOW THESE INSTRUCTIONS WILL DELAY ACTION ON YOUR APPLICATION. Please feel free to make copies of this sheet if you need additional space.

Experi	perience Record								
		OSITION, NAME OF EMPLOYER AND CHARACTER OF EACH  TIME Years to decimals in tenths							
Dates Mo Year From - To,	ENGAGEMENT. Make statements concise and of work on which engaged, your duties and degree in Chronological order, Earliest Space Between engagement. All time (whichever is later) MUST BE ACCOUNTE NESS, UNEMPLOYMENT, ETC.	e of responsibility. LISTENGAGEMENTS ENGAGEMENT AS NO. 1. DOUBLE ME SINCE HIGH SCHOOL OR AGE 18	Non-Engineering Employment	Academic c	Engineering Experience prior to College Graduation	(4)  Engineering Experience Experience Supseduent O College Graduation Prior to P.E.	Professional Engineering experience subsequent to P.E.	Name, Title and address of person most familiar with each engagement, preferably supervisor (NOT DECEASED). INDICATE IF P.E.	
	*Beginning at that point in time when those for whom or with whim you worked considered that you could be entrusted to carry out assignment without close day-							Page Total	
	to-day supervision.	Date						Cumulative Page Totals	
							1		

#### III. REFERENCES

# REFERENCES SHALL NOT ALL COME FROM THE SAME SOURCE

List below at least five (5) persons, three (3) of whom shall be licensed professional engineers, not relatives or members of this Board, to whom the Board may apply for information in regard to your character and professional ability.

Name	Address (with zip)	Occupation	Business Relatio to Applicant	
			1 <u>2/11/11 11 11 11 11 11 11 11 11 11 11 11 </u>	
		· <del></del>		
			:	
			1	
		-		
Administrative Regulations Chapter subscribe to the provisions therein.	zed myself with Kentucky Revised Statutes Chap r 18, including the Code of Professional Practic I do solemnly swear or affirm that I understand the cation is true, correct, and complete to the best of	e and Conduct and do the instructions and terms	hereby	