

Important Information
Regarding
Reinstatement Application for Professional Engineers

At its meeting on November 13, 2007, the State Board of Registration for Professional Engineers and Land Surveyors adopted a new policy regarding the license reinstatement of Professional Engineers and Land Surveyors.

Board Policy 07-02 is as follows:

All applicants seeking reinstatement of their registration following the license being administratively revoked for having an expired license for greater than 4 years shall be required to pass as a minimum the principles and practices examination, unless the applicant has continued their license in force from another acceptable jurisdiction without interruption and in compliance with current Continuing Education requirements for a licensed Georgia registrant during the time when the Georgia licensure was not active.

License Reinstatement Applicants should be aware that this application will be reviewed by the Board and if the applicant is determined to be eligible for reinstatement, one of the following options will be recommended and voted on at a Board meeting:

- If the applicant has maintained licensure in another jurisdiction without interruption, and otherwise meets continuing education requirements, there will be a \$1000 reinstatement fee assessed upon approval.
- If the applicant has **not** maintained licensure in another jurisdiction without interruption, and otherwise meets continuing education requirements, it will be necessary for the applicant to pass the Principles & Practices exam, for which the applicant will be given 4 offerings beginning with the next available offering. No additional Board fee will be assessed; however, the applicant will have to remit payment for the scheduling of the exam(s) to the exam administrator.

GEORGIA STATE BOARD OF PROFESSIONAL ENGINEERS & LAND SURVEYORS

237 Coliseum Drive • Macon, Georgia 31217 • (478) 207-2440

www.sos.ga.gov/plb/pels/

REINSTATEMENT APPLICATION FOR CERTIFICATE AS A PROFESSIONAL ENGINEER

Application Fee \$100 (non-refundable)

License Type: PROFESSIONAL ENGINEER

Additional License Types (currently or previously issued by the Georgia Professional Licensing Boards):

Method Obtained by:

Applicant is applying for above referenced license by: **Reinstatement** of License # _____

Name as desired on License: _____
First Middle Last

Names as shown on exam records or transcripts (if different):

First Middle Last

Social Security Number: _____ **Date of Birth:** _____

Physical Address: _____
Number and Street Apt. No. City/State Zip
P.O. Box not acceptable

Mailing Address: _____
(if different) Number and Street Apt. No. City/State Zip

Telephone Number Day Telephone Number Evening E-Mail Address

Affiliation:
Name of firm _____

Physical Address: _____
Number and Street Apt. No. City/State Zip
P.O. Box not acceptable

Mailing Address: _____
(if different) Number and Street Apt. No. City/State Zip

NOTE TO APPLICANT: This information will be entered into the Division database for Accounting and Licensing purposes. All items must be completed, and then duplicated on the next page of the application for Board review.

APPLICATION FOR REINSTATEMENT AS A PROFESSIONAL ENGINEER

(License that has expired for more than 4 years. If your license expired less than 4 years ago, you may renew online.)

Section 1: General Information

Date: ____/____/____

Name: _____
First Middle Maiden Last

Social Security Number*: ____-____-____ Birthplace: _____ Date of Birth: ____/____/____

**THIS INFORMATION IS AUTHORIZED TO BE OBTAINED & DISCLOSED TO STATE & FEDERAL AGENCIES PURSUANT TO O.C.G.A. § 19-11-1 & O.C.G.A. § 20-3-295, 42 U.S.C.A. § 551 & 20 U.S.C.A. § 101.*

Mailing Address: _____
Street and Number City State and Zip

Permanent Address: _____
Street and Number City State and Zip

Business Phone: (____) _____ Home Phone: (____) _____

In what year were you initially granted a Professional Engineer license in the State of Georgia? _____

Designate the one branch of engineering in which you propose to practice in Georgia: _____

Designate all the special branches of engineering in which you have been examined (civil, structural, mechanical, electrical, etc): _____

Have you practiced engineering on a project within the State of Georgia where a license was required, but you did so without a current license? Yes No If yes, include complete details on additional sheet.

Present Position (your title): _____

Company Name: _____ Company Address: _____

Have you ever been convicted or pled nolo contendere to a crime? Yes No If yes, include complete details on additional sheet.

Section 2: Registration

Lapsed Georgia Professional Engineer License number: _____

Expiration Date of your most recently lapsed Georgia License: _____

Has a professional license from any jurisdiction been revoked, suspended or sanctioned? Yes No

Name all the jurisdictions (states or territories) where you have been granted a Professional Engineer license:

Name all the jurisdictions where you have maintained an uninterrupted Professional Engineer license(s) (Provide verification of license in **current** state of residence.):

Name all jurisdictions where you no longer maintain a current professional license for whatever reason:

SECTION 3: EXPERIENCE
*** EXPERIENCE SINCE YOUR GEORGIA LICENSE WAS REVOKED ***

SHADED AREAS ARE FOR BOARD USE ONLY

School: _____	Degree/Date _____	ABET: Yes _____	No _____
Masters: _____	Degree/Date _____	ABET: Yes _____	No _____
Technology: _____	Degree/Date _____	ABET: Yes _____	No _____
Other: _____	Degree/Date _____	ABET: Yes _____	No _____
EIT State & Date: _____	PE State & Date: _____	Discipline _____	

Eng. #	Company/ Employer Name	Your Title	From: <u>Mo/Yr</u>	To: <u>Mo/Yr</u>	Total Months

Total # of Endorsement Forms: _____ (All Engagements MUST be endorsed.)

NOTES:

SECTION 6: ENDORSEMENT FORM

Section 6A – To Be Completed By Applicant

Applicant Name: _____
Last
First
Middle
Maiden

Engagement No. as listed in Section 3: _____

This endorsement is for: Reference & Experience Verification Reference Only Employment Verification Only

Georgia Law Section 43-15-15(d) states: “An application shall contain the names of not less than five persons, not related to the applicant by blood or marriage, of whom at least three shall be registered, active professional engineers...having personal knowledge of the experience on which the applicant predicates his qualifications.”

Experience described on this form was obtained while employed by: _____
Company Name

Address _____ City _____ State _____ Zip Code _____ County _____

For this engagement please provide name of direct supervisor: _____

Was your direct supervisor a registered PE? Yes No Other: _____

Endorser for this Engagement: _____

State your Title(s) & Name of Company. Describe experience (one line is not sufficient) detailing in first person the work you personally performed in design, study, review, testing or other tasks which required your engineering skills. This work should be progressive in difficulty and magnitude; demonstrate sufficient breadth and scope, not a narrow technical skill focus; and reflect the acquired ability to design and apply engineering principles to demonstrate that your judgment may be trusted on projects involving public health and safety. Do not attach resume or project lists. Experience must be verified by PE associates even if you are self-employed.

Dates		Engagement No.
From <u>Mo/Yr</u>	To <u>Mo/Yr</u>	
Type of Experience		%
Engineering Design		
Engineering Studies, Reports, Evaluations		
Engineering Research, Data Preparation & Interpretation		
Other Engineering Related Activities		
Non-Engineering (including surveying)		

If you need additional space, please attach additional sheets.

Section 6B – To Be Completed by Endorser
Applicant’s description in Section 6A above is:

Accurate Inaccurate (Explain if inaccurate): _____

Were you the applicant’s direct supervisor for this engagement? Yes No

If direct supervisor were you a registered engineer: Yes No State Registered/No.: _____

Discipline: _____ Date of Issue: _____

Signed: _____

SECTION 5: AFFIDAVIT BY APPLICANT

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Registration for Professional Engineers and Land Surveyors, and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1:

1) _____ I am a United States citizen 18 years of age or older. **Please submit a copy of your current Secure and Verifiable Document(s) such as driver’s license, passport, or other document as indicated on page 10 of the application.**

2) _____ I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. **Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.**

In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Georgia State Board of Registration for Professional Engineers and Land Surveyors and/or criminal prosecution.

Sworn to before me this _____ day of _____, (year) _____.

State of Georgia, County of _____

(Signature of Applicant)

(Date)

(Notary Public)

NOTARY SEAL
(Required)

My Commission Expires: _____



OFFICE OF SECRETARY OF STATE
PROFESSIONAL LICENSING BOARDS DIVISION
237 Coliseum Drive
Macon, Georgia 31217
(478) 207-2440

CONSENT FORM

I hereby authorize the Board of Registration for Professional Engineers and Land Surveyors ("Board") to receive any Georgia criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

Full Name (Print)

Physical Address (P.O. Boxes NOT Accepted)

Sex

Race

Date of Birth

Social Security Number

One of the following must be checked:

This authorization is valid for 90/180/___ (circle one) days from date of signature.

I, _____ give consent to the Board to perform periodic criminal history background checks for the duration of my licensure with this state.

Signature of Applicant

Date

Special licensure provisions (check if applicable):

- Working with mentally disabled
 Working with elder care
 Working with children

APPLICANT: PLEASE CHECK THE FORM OF IDENTIFICATION BELOW THAT YOU POSSESS. RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.

Name _____

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2
Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”) provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

_____ A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: <http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

_____ A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

_____ A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

_____ A driver’s license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

_____ A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

_____ In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]