



Name: \_\_\_\_\_

License Number: \_\_\_\_\_

Discipline: \_\_\_\_\_

**Georgia Board of Registration for Professional Engineers and Land Surveyors  
CE AUDIT REPORT FORM  
For the Four-year CE Reporting Period Ending December 31, 2020**

**PLEASE PRINT OR TYPE**  
Be sure to sign and date in  
The space provided

Email to: [PLB-Trades1@sos.ga.gov](mailto:PLB-Trades1@sos.ga.gov)

I certify that the above is true and accurate information and I have attached required documentation.

I verify that I have read and understood Board Rule Chapter 180-11 Continuing Professional Competency.

\_\_\_\_\_  
Signature of Licensee

\_\_\_\_\_  
Printed/Typed Name of Licensee

**PE/LS SEAL**

Daytime Telephone Number \_\_\_\_\_

License Number \_\_\_\_\_

License Issue Date \_\_\_\_\_

Discipline \_\_\_\_\_

