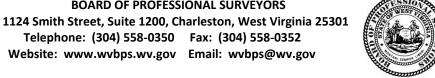
Information requested on this form must be typewritten or neatly printed and all questions must be answered. Incomplete, illegible, or altered applications will be rejected. Fees are non-refundable and non-transferable to a later exam. All applications expire six (6) years from date of application.

# STATE OF WEST VIRGINIA **BOARD OF PROFESSIONAL SURVEYORS**

Telephone: (304) 558-0350 Fax: (304) 558-0352



ATTACH A RECENT **PASSPORT-TYPE** PHOTO IN THIS **SPACE** 

# APPLICATION FOR REGISTRATION TO PRACTICE SURVEYING West Virginia Code 30-13A-8 (Principles & Practice of Surveying and WV State Exam)

EDUCATION &	EXPERIENCE	REQUIREME	NTS		
<b>T</b> 520 424 04 1/61 <b>-</b>				oved by the Book Co. Co.	Board Use Only
	ty hours of survey	_		-	ch degree must include a perience in surveying in
related courses,	plus four years or	more of experience	e in surveying, includ	ing two years of exper	rs of surveying or surveying- ience in responsible charge ge in the practice of surveying.
must include a m surveying, includ	ninimum of thirty ling two years of e	hours of surveying experience in respo	or surveying related	courses, plus four year the direct supervision c	by the Board, which degree s or more of experience in of a licensee or a person
☐ §30-13A-8(e) Bega December 31, 20		experience require	ment with Letter of I	ntent on file with the B	soard prior to
I. GENERAL INF	ORMATION			Date	20
Full Legal Name				Social Security No	
	First	Middle	Last		
Birth Date		Birthplace		Citizenship _	
(Mark X in one of the s	quares to indicate <u>p</u>	orimary address for L	Board communications)	Home Phone	No
☐ Residence Address			City	State	Zip Code
☐ Business Name				Present Position	
Address			City	State	Zip Code
Telephone No	Fa	эх	Cell No	E-Mail	
II. PROFESSION	AL LICENSURE EXAN	<u>//INATIONS</u>			
Have you applied for lic	ensure in any other	State?	If so, where?	W	nen?
Did you pass the Funda	mentals of Surveyin	g examination in and	other state? *	If so, list state	Date
Are you a certified Surv	eyor in Training or S	Surveyor Intern?	If so, list state	Date	Number
Are you registered/licer	nsed with any other	WV Board?	If so, list boards		
Have you ever been cor	nvicted of a crime in	volving moral turpiti	ude? If yes, E	xplain:	

<sup>\*</sup>Applicant must request state PS board to provide verification of exam scores/SI certification to WVBPS prior to application deadline.

# III. REFERENCES OF CHARACTER AND QUALIFICATION

Applicant will list the names and addresses of not fewer than five citizens unrelated to him/her, of whom at least three must be professional, registered, or licensed surveyors, preferably in West Virginia, and persons to whom the applicant has reported or with whom he/she has been professionally associated. Only one reference will be acceptable from the same employer or firm. No member of the Board will be accepted as a reference. If any of the listed individuals are current or former supervisors who will also be asked to complete an employment verification form, references may provide comments in the space provided on that form in lieu of writing a separate reference letter.

Applicant will be responsible for asking listed individuals to provide letters of reference directly to the Board, and will follow-up to ensure that letters are received by the application deadline.

NAME	MAILING ADDRESS/ZIP CODE	RELATION	YEARS KNOWN
1			
2			
3			
4			
5			

## IV. EDUCATION

State in chronological order the name and location of each high school or preparatory school, college, university, or technical school attended, the time spent at each, and if a graduate, the year of graduation. Applicant will request an official college or university transcript, to be sent directly to the Board by that institution, to verify surveying degree conferred.

NAME AND LOCATION OF INSTITUTION	YEARS: FROM-TO	DATE GRADUATED	TOTAL TIME	TECHNICAL COURSES	DEGREE RECEIVED
Preparatory Education – High and Private Schools					
Surveying Education – Name of College or University					
Other Higher Education – Name of College or University					
Technical or Vocational Schools – Certificate or Certification Program					

## V. PROFESSIONAL SURVEYING EXPERIENCE

## IMPORTANT - READ BEFORE COMPLETING SURVEYING EXPERIENCE

- A. Each of the three columns under "time" should be filled out for each engagement. Use zeros where necessary, but do not leave blank spaces, and do not use the word "yes".
- B. The time in "Responsible Charge" plus the time in "Technician Level" must equal the time entered under "Total Time" (i.e. Columns 2 and 3 must equal column 1.).
- C. Number each engagement and list them in chronological order. Experience must be documented and verified by supervisor(s), on forms provided by the Board. Forms for each engagement must be signed by both applicant and verifier and returned to the Board by the application deadline.
- D. **RESPONSIBLE CHARGE** is defined as "direct control of surveying work under the direct supervision of a licensee or person authorized in another state or country to engage in the practice of surveying," *West Virginia Code* 30-13A-3(z), (2010), in order to gather, prepare or analyze data, evidence, or information that will aid and assist the licensed professional in resolving boundaries, or managing data or information regarding work related to the practice of land surveying.
- E. **TECHNICIAN** level is defined as work performed under the direction of a crew chief or licensed professional where the responsibility and knowledge requirements are minimal. Primarily this level involves work in a field crew, other than as crew chief, or in the office doing basic drafting or computations.

## ALL COLUMNS MUST BE COMPLETED

DATE		TITLE OF POSITION	TIME (YEARS IN DECIMALS TO TENTHS)			
NUMBER OF ENGGEMENT	FROM MMYY TO	TITLE OF POSITION  NAME OF EMPLOYER  LOCATION OF ENGAGEMENT	(1) Total Time	(2) Responsible Charge	(3) Technician Level	NAME OF SUPERIOR OR PERSON TO WHOM APPLICANT REPORTED
	MMYY		Time	T	ECVCI	
		TOTAL TIME				

## VI. REQUIRED DATA TO BE SUBMITTED WITH APPLICATION

- A. ALL APPLICANTS shall furnish TWO COMPLETE SURVEYS COMPLETED WITHIN THE LAST 3 YEARS:
- 1. ONE MUST BE A BOUNDARY SURVEY WITH A SIGNED AND SEALED PLAT, DESCRIPTION, AND REPORT OF SURVEY, AND THE FOLLOWING SUPPORTING DOCUMENTATION: FIELD NOTES OR DATA COLLECTOR RAW DATA FILES, FIELD TRAVERSE SHEET OR POINT PLOT ALONG WITH COMPARATIVE DEED TO SURVEY INVERSES; A COPY OF ABSTRACT (research information) showing claim of title information and the instrument containing the calls (legal description) for the tract of land surveyed (Note: Provide prior deed and/or previous survey/subdivision plat of land surveyed if instrument conveying titles does not contain a legal description); and A COMPLETE WORK MAP showing the surveyed tract, which shall be inclusive of adjoiner deed calls, recording information, current ownership, taxation, and any necessary data needed to conduct a thorough field survey. Survey may be made in any state but should closely follow West Virginia minimum standards. All plats, descriptions and reports must have an original P.S. signature and seal. Supporting documentation may be submitted digitally in PDF format on CD-ROM.
- 2. THE SECOND SURVEY IS THE APPLICANT'S CHOICE, AND MUST ALSO BE SIGNED AND SEALED AND INCLUDE THE APPROPRIATE SUPPORTING DOCUMENTATION. TWO COMPLETE SURVEYS WITH APPROPRIATE SUPPORTING DOCUMENTATION MUST BE SUBMITTED OR THE APPLICATION WILL BE CONSIDERED INCOMPLETE.
  - B. ALL APPLICANTS shall furnish a RESUME OF THEIR SURVEYING EXPERIENCE, including types of survey projects and their involvement.

## VII. INSTRUCTIONS FOR FILING APPLICATION

PLEASE ENSURE THAT YOU HAVE COMPLETED ALL SECTIONS AND THAT ALL REQUESTED DOCUMENTATION IS FURNISHED. Application should be prepared in duplicate; submit one copy to the Board and retain the duplicate. Applicants must ensure that the Board receives license and employment verifications and reference letters by the **APPLICATION DEADLINE (February 1 for Spring exams & August 1 for Fall exams)**.

Applicants seeking test accommodations under the Americans with Disabilities Act should consult the NCEES we<u>bsite (www.nce</u>es.org). The completed questionnaire and supporting documentation must also be submitted to the NCEES Special Accommodations Coordinator by the application deadline. Applicants seeking test accommodations for the West Virginia state exam should contact the Board office.

Payment of fees shall be by Check or Money Order, \$200 Principles & Practice of Surveying Application and \$200 WV State Exam Application, (Same Form) payable to the West Virginia Board of Professional Surveyors. Checks returned for insufficient funds will be subject to a \$25 administrative fee and other applicable bank or regulatory charges. Repayment must be paid by cashier's check or money order. FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE TO A LATER EXAM

REFUNDABLE AND NON-TRANSFERABLE TO A	LATER EXAM.	
VIII. <u>AFFIDAVITS</u> STATE OF	cc	DUNTY OF
belief, the foregoing statements are true in su conduct is integrity and I will discharge my dur fairness and impartially to all. I will interest m	bstance and effect and are made in ties if licensed as a land surveyor wit yself in the public welfare and be re	ntents described thereof and, to the best of my knowledge and good faith. Furthermore, I believe the keystone of professional th fidelity to the public, my employers, and clients, and with eady to apply my special knowledge for the benefit of mankind. In any enterprise of questionable character. In my dealings with
West Virginia Code § 48-15-303 requires that swearing, that these answers are true and cor	• •	the following questions and certify, under penalty of false
Do you have a child support obligation of yes, does arrearage amount equal Are you the subject of a child-suppo	or exceed the amount payable for 6	6 months? Yes 🗖 No 🗖
	_	Signature of Applicant
Subscribed and sworn to before me this	day of, 20	O My Commission expires
	_	
(Notary Seal)		Signature of Notary Public
IX. RECORD OF THE BOARD (This spa	ce NOT to be used by Applicant)	
Action of Board: Approved	Denied	Date
Examinations Passed: FS/Date	PS/Date	WV/Date
License Issued Number	Under Classification _	Certificate Issued
Board Documents/Forms/Exams/Application – PS/V	VV(Revised May 2023)	