

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
1124 Smith Street, Suite B127C, Charleston, West Virginia 25301
Telephone: (304) 558-0350 Fax: (304) 558-0352
Web site: www.wvbps.wv.gov E-mail: wvbps@wv.gov



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SPACE

**APPLICATION FOR REGISTRATION TO PRACTICE SURVEYING
(COMITY – WV State Exam Only)**

EDUCATION & EXPERIENCE REQUIREMENTS

Licensed in other jurisdiction after 2004

- §30-13A-8(a)(1) Four-year degree or a bachelor degree in surveying approved by the Board, which degree must include a minimum of thirty hours of surveying or surveying-related courses, plus two years or more of experience in surveying in responsible charge.
- §30-13A-8(a)(2) Four-year degree or a bachelor degree, has completed a minimum of thirty hours of surveying or surveying-related courses, plus four years or more of experience in surveying, including two years of experience in responsible charge under the direct supervision of a licensee or a person authorized in another jurisdiction to engage in the practice of surveying.
- §30-13A-8(a)(3) Two-year degree or an associate degree in surveying or a related field approved by the Board, which degree must include a minimum of thirty hours of surveying or surveying related courses, plus four years or more of experience in surveying, including two years of experience in responsible charge under the direct supervision of a licensee or a person authorized in another state or country to engage in the practice of surveying.

Experience in lieu of formal education and licensed on or before December 31, 2004.

1. GENERAL INFORMATION

Date _____ 20____

Full Legal Name _____ Social Security No. _____
First Middle Last

Birth Date _____ Birthplace _____ Citizenship _____

(Mark X in one of the squares to indicate primary address for Board communications) Home Phone No. _____

Residence Address _____ City _____ State _____ Zip Code _____

Business Name _____ Present Position _____

Address _____ City _____ State _____ Zip Code _____

Telephone No. _____ Fax _____ Cell No. _____ E-Mail _____

2. PROFESSIONAL LICENSURE/REGISTRATION(S)

State Board first licensed with * _____ Date of Licensure _____ License No. _____

Is license now in force? _____ If not, why? _____

If you are licensed as a professional surveyor in other states, list states, numbers and classifications: * _____

Are you being investigated by a disciplinary authority in another state or do you have charges pending against your license to practice surveying in another state? _____

Has license ever been suspended or revoked? _____ If so, why? _____

Have you ever been convicted of a crime involving moral turpitude? _____ If yes, Explain: _____

***Applicant must request all listed state PS boards to provide verification of exam scores and licensure as well as any disciplinary actions to WVBPS prior to application deadline.**

Board Use Only

3. 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. _____	_____	_____	_____

4. 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					

6. RESUME

ALL APPLICANTS shall furnish a **RESUME OF THEIR SURVEYING EXPERIENCE**, including types of survey projects and their involvement.

7. 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, college transcript, and reference letters by the **APPLICATION DEADLINE (January 1 for Spring exam & July 1 for Fall exam)**.

Applicants seeking test accommodations under the Americans with Disabilities Act should consult the NCEES website (www.ncees.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, 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.*

8. AFFIDAVITS

STATE OF _____ COUNTY OF _____

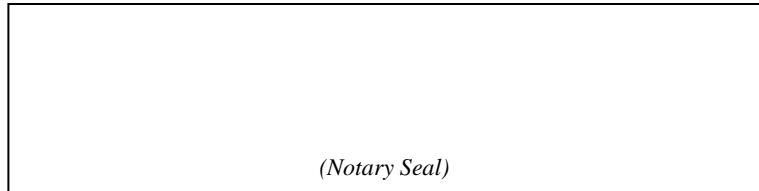
Being first duly sworn, I, the applicant named in this application, have read the contents described thereof and, to the best of my knowledge and belief, the foregoing statements are true in substance and effect and are made in good faith. Furthermore, I believe the keystone of professional conduct is integrity and I will discharge my duties if licensed as a land surveyor with fidelity to the public, my employers, and clients, and with fairness and impartially to all. I will interest myself in the public welfare and be ready to apply my special knowledge for the benefit of mankind. I will uphold the honor and dignity of my profession and will avoid association with any enterprise of questionable character. In my dealings with fellow surveyors, I will be fair and tolerant.

West Virginia Code § 48-15-303 requires that each applicant for licensure answer the following questions and certify, under penalty of false swearing, that these answers are true and correct:

- Do you have a child support obligation? Yes No
- If yes, does arrearage amount equal or exceed the amount payable for 6 months? Yes No
- Are you the subject of a child-support related subpoena or warrant? Yes No

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 20____. My Commission expires _____



Signature of Notary Public

RECORD OF BOARD (This space 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 _____