WASHINGTON STATE DEPARTMENT OF LICENSING

Geologist and Specialty Application Instructions

Use this application to apply for a geologist, engineering geologist, or hydrogeologist license.

Mail your application and fee to:
Geologist Licensing Board
Department of Licensing
PO Box 35001
Seattle WA 98124-3401

Mail all other supporting documents to:
Geologist Licensing Board
Department of Licensing
PO Box 9045
Olympia WA 98507

Geologist license requirements

To be licensed in Washington as a geologist, you must:

1. Have a degree from an accredited college or university in geological sciences or a related degree as approved by the Board. Your degree must include 24 semester or 36 quarter hours of upper division geology courses or course work educationally equivalent in content and rigor as approved by the Board. For more detail on required course work, visit **dol.wa.gov/business/geologist/**
2. Have at least 5 years of documented, verifiable professional geological experience. At least 3 years must be under the supervision of a licensed geologist.
3. Pass the National Association of State Boards of Geology (ASBOG®) Fundamental of Geology and Practice of Geology examinations, or an examination the Board approves as equivalent.
4. Be currently licensed in another state, if applying by reciprocity.

Specialty license requirements

To be licensed in Washington as an engineering geologist or hydrogeologist, you must:

1. Be licensed as a geologist
2. Have completed **one** of the following advanced studies pertinent to your chosen specialty.
   - 18 semester or 27 quarter hours of graded academic course work
   - 270 hours of seminars or workshops
   - 540 hours of on-the-job training under the supervision of a geologist licensed in your chosen specialty, or others qualified to have responsible charge, as determined by the Board
3. Have at least 5 years of documented, verifiable experience in your chosen specialty, including at least 3 years under the supervision of a geologist licensed in your chosen specialty, or others qualified to have responsible charge, as determined by the Board. *Note: If applying for 2 specialties, you must have at least 5 years of documented, verifiable experience in **each** specialty.*

Alternative experience credit

- One year of full-time graduate study in geology or a qualified related area counts as one year of experience, up to a maximum of 2 years.
- Geological research or teaching at the university or college level is credited year for year if, in the judgment of the Board, it is comparable to experience obtained in the practice of geology or a specialty.

How to apply for a license

1. Submit a completed Geologist and Specialty License Application (sections 1-5) with a check or money order payable to the Department of Licensing to our office.
2. Complete the Applicant Information section of page 4 and send to each of the verifiers listed on page 3 (Qualifying Experience, Section 4). The person verifying will send the completed form directly to our office. *Note: Employment and Experience Verification is not required if you are only applying for the Fundamentals of Geology Exam.*
3. If you have only one Employment and Experience Verification, complete the Applicant portion of the Personal Reference form (page 7) and send to at least one reference to complete and submit to our office.
4. Request a certified copy of your transcript(s) be sent to our office. **Only sealed transcripts sent directly from the issuing college or university are accepted.** Educational equivalents are subject to approval and must be documented by providing a course syllabus, outline, or certificate of completion for non-academic courses.
5. After you are approved by the Board to take the ASBOG® exams (approximately 2 weeks after the application deadline), you will receive a copy of the ASBOG® National Examination Candidate Request Form from our office. Complete the lower section of the form and send it with the exam fees directly to ASBOG®. Exam admission letters for approved candidates will be sent approximately one month prior to the date of the exam.
6. **Specialty applicants only:** Submit the applicable List of Projects (pages 5 and 6) with your application. Also complete the Applicant Information section of page 4 and send a copy of the List of Projects to each of the verifiers listed. The person verifying will send the completed form directly to our office.
7. **Reciprocity applicants only:** Complete the Applicant section of the Geologist Licensing and/or Exam History Certification (page 8) and send to your state of licensure. They will complete the Certification Verification section and return to the form to our office.

Questions?

Please feel free to contact us at **(360) 664-1497** or by email to geologist@dol.wa.gov.

Click here to START or CLEAR, then hit the TAB button

WASHINGTON STATE DEPARTMENT OF LICENSING

Geologist and Specialty License Application

For validation only

003-070-208-0000

License and method applying for *(check all that apply)*:

Geologist	☐ Exam – **$100 fee**	☐ Reciprocity – **$200 fee**
Engineering geologist*	☐ Exam – **$100 fee**	☐ Reciprocity – **$150 fee**
Hydrogeologist*	☐ Exam – **$100 fee**	☐ Reciprocity – **$150 fee**

***** For a specialty license, you must have, or apply for, a Geologist license.

Exam registering for *(check one):*

☐ Fundamentals of Geology
☐ Practice of Geology
☐ Both
☐ Specialty exam (hydrogeologist or engineering geologist) – **$300 fee for each specialty exam**

Complete this application and send sections 1-5 (pages 2 and 3) with a check or money order, payable to the Department of Licensing, to: **Geologist Licensing Board, Department of Licensing, PO Box 35001, Seattle, WA 98124-3401**

1 Personal information

PRINT or TYPE Name *(Last, First, Middle – will appear in the proper order on your wall certificate)*			Maiden name *(If any – will not appear on certificate)*
Street address			
City	State	ZIP code	County
(Area code) Daytime telephone number	(Area code) Fax number	(Area code) Home telephone number *(optional)*	Gender ☐ Male ☐ Female
Date of birth	Social Security number*	email address	Would you like to be added to the Board's electronic mailing list? ☐ Yes ☐ No
If you are applying by **reciprocity**, indicate the state where you passed an exam for licensure	Exam state	License state	Date of original license	License number
If you are applying by **reciprocity for a specialty license**, indicate the state where you passed a specialty exam for licensure	State	Specialty	Year licensed	License number

*Social Security number - Mandatory for child support enforcement. Kept on file. RCW 26.23.150
If you do not have a Social Security number, you must submit an individual Tax Identification Number or a declaration.

2 Educational background

Name of college, university, technical school	Location	Dates of attendance From	To	Degree
Applicable education and supplemental training	**Location**	**Date of attendance From**	**To**	**Certificate/Degree etc.**

3 Licensing and legal history

1. Have you ever been convicted of a felony or misdemeanor other than a traffic violation? . . . . . ☐ Yes ☐ No
2. Have you had a professional license of any type revoked, suspended, or denied in any licensing jurisdiction? . . . . . ☐ Yes ☐ No
3. Have you received any disciplinary action against a professional license in another jurisdiction? . . . . . ☐ Yes ☐ No

If you answered "Yes" to any of the questions in this section, attach explanation on a separate sheet.

We are committed to providing equal access to our services.
If you need accommodation, please call (360) 664-6597 or TTY (360) 664-0116.

4 Qualifying experience – List in chronological order *(most recent first)*

Include only **practical work experience** performing activities involved in the practice of **geology**. A resumé alone is not enough.

Full name and complete current address of employer, including self employment and military service	Period of employment (month/year)	Total hours worked per week	Nature of service performed List types of projects, major duties	Verifier name and title
	From To			
	From To			
	From To			
	From To			
	From To			
	From To			

If additional space is required, please attach an 8 1/2" x 11" sheet.

5 Certification

Answer the following

1. Do you agree to abide by all the applicable laws and rules regarding the practice of geology and geology specialties? . . . . . ☐ Yes ☐ No
2. Do you authorize any business associates (past and present) and any governmental agencies (local, state or federal) to release any information, files or records which may be required for a background investigation, to the Department of Licensing? . . . . . ☐ Yes ☐ No
3. Do you understand that any false information in this application, may constitute cause for the denial, suspension or revocation of your license to practice in the state of Washington? . . . . . ☐ Yes ☐ No

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date and place

X **Applicant: When you have completed this form, please print it out and sign here.**

Applicant signature

WASHINGTON STATE DEPARTMENT OF
LICENSING
Geologist Licensing Board
PO Box 9045
Olympia WA 98507-9045

Employment and Experience Verification

Applicant instructions

Send a copy of this Employment and Experience Verification form to each of the verifiers listed in Section 4, Qualifying Experience, of your application. Urge them to respond quickly and directly to the Board office. Unlicensed verifiers must also send their resume for review. If a verifier is deemed not qualified, you will be notified.

If you are applying for a specialty, complete and attach the List of Projects (for Specialty License Only) form for each verifier. If you are self-employed or cannot verify your experience because a client or business is no longer available, please contact our office at **(360) 664-1497** or by email to geologist@dol.wa.gov for guidance.

Applicant – Applicant complete this section

Applicant name			
License type applying for ☐ Geologist ☐ Hydrogeologist ☐ Engineering geologist		(Area code) Telephone number	
Current address	City	State	ZIP code
Worked at *(Name and location of organization)*			
From *(month, day, year)*	To *(month, day, year)*	Total calendar months	Average hours per week
Describe roles and responsibilities. If applying for a specialty, attach applicable list of projects.			

Verifier information – Verifier complete this section

The person whose name appears above has applied to the Board for geologist licensing. Your information will be used to determine the applicant's eligibility for licensure. After completing your verification, please return this form and, if applicable, any attached List of Projects to: **Department of Licensing, Geologist Licensing Board, PO Box 9045, Olympia, WA 98507-9045**. If you are not licensed as a geologist, please attach a copy of your resume.

Verifier name		Title	
Verifier current organization		(Area code) Telephone number	
Organization address *(Street, city, state, ZIP code)*			
Your professional relationship with applicant *(Employer, supervisor, coworker, other)*			
Your state of licensure	License type	License number	Year of licensure
The Washington Geologist Licensing Board requires that no person shall be eligible for registration as a geologist who is not of good character and reputation. If you believe this applicant does not satisfy this requirement, please explain:			

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date and place

X **Verifier: When completed, please sign here.**

Signature

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Engineering Geologist
List of Projects

(For specialty license only)

Use the codes at the bottom of the form to indicate the knowledge, skills, and abilities (KSAs) you used in each project. You must have KSAs in each section A-G to qualify for an engineering geologist specialty. You must document 5 years of project experience in engineering geology. If you are also applying for a hydrogeology specialty, you must have a total of 10 years experience.

Applicant name _____

KSA codes	Time period (month/year)	Project and location	Type and scope of services provided	Client name, address, and (area code) telephone number
	From To			
	From To			
	From To			
	From To			
	From To			
	From To			

Attach additional sheets if necessary.

Use the following list to fill in the column marked KSA code(s). Insert the letter corresponding to the KSAs that you used on each project.

Engineering geologists

A – Knowledge of the geology of the state of Washington.
B – Skill and ability in use of geotechnical field classification systems for soil and rock.
C – Ability to recognize landforms from surficial and deep-seated geologic processes.
D – Knowledge and ability to evaluate and analyze soil and rock mechanical relationships.
E – Knowledge of the appropriate application of geotechnical laboratory testing methods.
F – Ability to interpret and portray engineering geologic information and data three dimensionally, at a scale appropriate for site-specific applications.
G – Knowledge and understanding of the principles of grading codes, as well as critical areas, shoreline and other pertinent regulations.

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Hydrogeologist List of Projects

(For specialty license only)

Use the codes at the bottom of the form to indicate the knowledge, skills, and abilities (KSAs) you used in each project. You must have KSAs in each section H-L to qualify for a hydrogeologist specialty. You must document 5 years of project experience in hydrogeology. If you are also applying for a engineering geology specialty, you must have a total of 10 years experience.

Applicant name _____

KSA codes	Time period (month/year)	Project and location	Type and scope of services provided	Client name, address, and (area code) telephone number
	From			
	To			
	From			
	To			
	From			
	To			
	From			
	To			
	From			
	To			
	From			
	To			

Attach additional sheets if necessary.

Use the following list to fill in column marked KSA code(s). Insert the letter corresponding to the KSAs that you used on each project.

Hydrogeologists

H – Knowledge of the hydrogeology of the state of Washington.
I – Knowledge of and skill in applying the principles of vadose and saturated zone hydraulics, and groundwater quantity and quality.
J – Knowledge of federal, state, county, and local regulations applicable to groundwater resources.
K – Ability to apply elementary soil and rock mechanics in relation to groundwater, including the description of soil and rock samples.
L – Ability to prepare the interpret logs as they relate to subsurface fluid movement, interaction with geologic materials and transport of energy and chemical constituents.

WASHINGTON STATE DEPARTMENT OF LICENSING

Personal Reference

Use this form to verify your good character. If you have two or more Employment and Experience Verifications that are attesting to your good character, you do not need to use this Personal Reference form.

When completed, mail to:
Geologist Licensing Board, Department of Licensing, PO Box 9045, Olympia, WA 98507-9045

If you have questions, please feel free to contact us at **(360) 664-1497** or by email to geologist@dol.wa.gov.

Applicant – Applicant complete this section

Name		(Area code) Telephone number
Address		
City	State	ZIP code

Reference information – Reference complete this section

This form has been sent to you by the applicant. Please complete and mail directly to:
Geologist Licensing Board, Department of Licensing, PO Box 9045, Olympia, WA 98507-9045

PRINT or TYPE Reference name		(Area code) Telephone number
Reference address		
City	State	ZIP code

The above named person has applied for licensing as a geologist or geologist specialist in the state of Washington. The Washington Geologist Licensing Board requires, as part of the licensing process, personal references to satisfy the Board as to the good character and reputation of the applicant.
Do you believe the applicant is of good character and reputation? . . . . . ☐ Yes ☐ No

If no, please explain:

X **Reference: When completed, please sign here.**

Reference signature Date

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WASHINGTON STATE DEPARTMENT OF LICENSING

Geologist Licensing and/or Exam History Certification

Reciprocity Applicants Only

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Applicant – Applicant complete this section

Name			Date of birth
Address			
City	State	ZIP code	State(s) of initial license and/or exam

Certification – Issuing jurisdiction complete this section

License information

The applicant named above was licensed as:

	Certificate number	Date issued	Valid until
☐ Geologist			
☐ Hydrogeologist			
☐ Engineering geologist			

Basis of licensure

☐ Written exam:

	Exam date		Exam date
Fundamentals of Geology		Practice of Geology	
Engineering Geology		Hydrogeology	

☐ Reciprocity (state): _____

☐ Grandfathered (state): _____

Answer the following

1. Has any disciplinary action ever been taken against the applicant? . . . . . ☐ Yes ☐ No
   If yes, please explain *(attach separate sheets, if needed)*:

2. If yes, has the applicant satisfied the requirements of the disciplinary action? . . . . . ☐ Yes ☐ No
   If no, please explain:

PRINT or TYPE name

Title

(Area code) Telephone number — Certifying state/jurisdiction

X **Issuing jurisdiction: When completed, please sign here.**

Signature — Date

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