

Professional Engineer Registration Application

To become a professional engineer:

- You must have a minimum of 8 years of approved engineering experience. (Education in an accredited engineering program may count for up to 4 years of this experience.)
- You must successfully pass the Fundamentals of Engineering (FE) and Professional Engineer (PE) exams. (You can apply to waive the FE exam. [WAC 196-12-050](#))
- You must successfully pass the Washington Law and Ethics exam.

For validation only

All applicants must:

1. Complete this form and send the signed application, the non-refundable fee of \$65 for exam applicants or \$110 for comity applicants in a check or money order payable to the Department of Licensing, and the Experience Record Summary (pages 1-3) to:

**Board of Registration for Professional Engineers and Land Surveyors
 Department of Licensing
 PO Box 9048
 Olympia, WA 98507-9048**

2. Complete the Experience Description and Verification section (pages 4-6) and send to the person(s) verifying the experience. The person verifying will send the completed form directly to our office. (Comity applicants: If you are having an NCEES engineering record sent to us, complete only pages 1-2 and send to us.)
3. If the application is based in part upon your completion of exams in another state, send the License or Exam Verification Request form (page 7) to the state board where you took the Fundamentals of Engineering (FE) exam or were originally licensed by exam. If you have successfully passed the FE exam in Washington State, you do not have to complete the License or Exam Verification Request form.
4. If you want any education considered towards the requirements, request an official transcript be sent to: Board of Registration for Professional Engineers and Land Surveyors, Department of Licensing, PO Box 9025, Olympia, WA 98507. Photocopies are not acceptable.
5. You will receive an email with information to access the Law and Ethics exam that must be successfully passed before your application is considered complete.

Applicant

Application type: (check one) **by Exam - \$65** **by Comity - \$110**

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)	
Social Security number <small>Used for child-support enforcement. Kept on file. RCW 26.23.150</small>	Date of birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Mailing address			
City	State	ZIP code	County
Present position		Business name	
Business location address			
City	State	ZIP code	County
(Area code) Business telephone number	(Area code) Residence telephone number	email	
Branch of engineering in which licensure is desired			
Answer the following Has any court or licensing jurisdiction taken action against you for your practice in engineering or land surveying? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach an explanation on additional sheet. Have you ever been convicted of or entered a plea of <i>nolo contendere</i> to any criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach an explanation on additional sheet. Are you requesting to waive the FE exam? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Applicant name _____

Applicant – continued

Name and location of colleges, universities, technical schools attended	Dates of attendance		Curriculum	Degree date
	From	To		

Previous and current registration

Answer the following

Have you filed an application with this office within the last five years? Yes No

If yes, date applied _____ Certificate number _____

Application type: Engineer-in-Training Professional Engineer Professional Land Surveyor

Written FE exam in state of _____

Written PE exam in state of _____

Written SE exam in state of _____

Number and date of original certificate:

EIT number _____ State _____ Issue date _____

PE number _____ State _____ Issue date _____

SE number _____ State _____ Issue date _____

Is certificate now in force in original state? Yes No

If not, why?

Engineer references

Give names and addresses of five references (not relatives), at least three of which are registered professional engineers, having personal knowledge of your character and professional reputation.

Name	Position	Address/City/State	Certificate number

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

_____ **X** _____
 Date and place Applicant signature

Once filed, this application is a public record and is subject to public disclosure. RCW 42.56

Applicant name _____

Experience record summary

Please list all of your employers below beginning with the most recent. This list is to include the entire time from leaving college (if applicable) or beginning your engineering career to the present time. Those periods while in school, unemployed, or non-engineering work must also be included. If not verifying, indicate "No". Any experience not verified will not be counted towards the experience requirement.

Verification number	Time period (begin with most recent) From (month-year) To (month-year)	Employer	To be verified (yes or no)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			

Applicant name _____

Verification number _____

Work experience descriptions – continued

Describe your experience

C. Identifying possible alternative methods and concepts.

D. Defining performance specifications and functional requirements.

E. Solving engineering problems.

F. Interacting with professionals from other areas of practice.

G. Effectively communicating recommendations and conclusions.

H. Demonstrating an understanding and concern for energy/environmental considerations and sustainability of resources.

Applicant name _____ Verification number _____

Verification instructions

After completing your verification, please return this form and the attached work experience descriptions (pages 4-6) to:

Board of Registration for Professional Engineers and Land Surveyors
Department of Licensing
PO Box 9025
Olympia, WA 98507

Work experience verification – supervisor/verifier complete this section

Name of person completing this verification	Professional registration/license number	State		
<p>If you are not the applicant's supervisor, please explain your working relationship to the applicant and how you are able to provide this verification: _____</p> <p>_____</p> <p>_____</p>				
<p>If you are not a licensed professional engineer, under what authority are you verifying experience? (federal agency, exempt corporation, etc.) _____ Years of engineering experience you have: _____</p>				
<p>Answer the following</p> <p>Do you feel qualified and prepared to verify the experience in categories A through H from the attached Work Experience section? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, please explain: _____</p> <p>_____</p> <p>_____</p>				
<p>Do you agree with the applicant's employment time and hours worked? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, please explain: _____</p> <p>_____</p> <p>_____</p>				
<p>Do you agree with the applicant's description of work and duties? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, please explain: _____</p> <p>_____</p> <p>_____</p>				
<p>During this time of employment, how long has the applicant been in a position of making engineering judgments and decisions? _____ years/months</p>				
<p>Please check the work experience categories in which you believe the applicant is competent and prepared to be examined for admission to the profession:</p> <table style="width:100%; border: none;"> <tr> <td style="width:50%; vertical-align: top;"> <input type="checkbox"/> A. Formulating conclusions and recommendations <input type="checkbox"/> B. Identifying design and/or project objectives <input type="checkbox"/> C. Identifying possible alternative methods and concepts <input type="checkbox"/> D. Performing performance specifications and functional requirements <input type="checkbox"/> E. Solving engineering problems </td> <td style="width:50%; vertical-align: top;"> <input type="checkbox"/> F. Interacting with professionals from other areas of practice <input type="checkbox"/> G. Effectively communicating recommendations and conclusions <input type="checkbox"/> H. Demonstrating an understanding and concern for energy/environmental considerations and sustainability of resources </td> </tr> </table>			<input type="checkbox"/> A. Formulating conclusions and recommendations <input type="checkbox"/> B. Identifying design and/or project objectives <input type="checkbox"/> C. Identifying possible alternative methods and concepts <input type="checkbox"/> D. Performing performance specifications and functional requirements <input type="checkbox"/> E. Solving engineering problems	<input type="checkbox"/> F. Interacting with professionals from other areas of practice <input type="checkbox"/> G. Effectively communicating recommendations and conclusions <input type="checkbox"/> H. Demonstrating an understanding and concern for energy/environmental considerations and sustainability of resources
<input type="checkbox"/> A. Formulating conclusions and recommendations <input type="checkbox"/> B. Identifying design and/or project objectives <input type="checkbox"/> C. Identifying possible alternative methods and concepts <input type="checkbox"/> D. Performing performance specifications and functional requirements <input type="checkbox"/> E. Solving engineering problems	<input type="checkbox"/> F. Interacting with professionals from other areas of practice <input type="checkbox"/> G. Effectively communicating recommendations and conclusions <input type="checkbox"/> H. Demonstrating an understanding and concern for energy/environmental considerations and sustainability of resources			
<p>Would you recommend this applicant for licensure if requirements are met? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>				
<p>RCW 18.43.040 states that no person shall be eligible for registration as an engineer who is not of good character and reputation. If you believe this applicant does not satisfy this requirement, please explain:</p> <p>_____</p> <p>_____</p> <p>_____</p>				

X
Supervisor/Verifier signature

Date

Professional Engineer License or Exam Verification Request

Send this completed form to:

**Board of Registration for Professional Engineers and Land Surveyors
Department of Licensing
PO Box 9025
Olympia, WA 98507** or email to: npham@dol.wa.gov.

Applicant – applicant complete this section

Name	Social Security number	Date of birth
Address		
City	State	ZIP code

Certification verification – state board complete this section

State board name		
Address		
City	State	ZIP code

Applicant certification/license information
The applicant named above was certified or licensed as:

	Certificate number	Date issued	Expiration date
<input type="checkbox"/> Engineer-in-Training	_____	_____	_____
<input type="checkbox"/> Professional Engineer	_____	_____	_____
<input type="checkbox"/> Structural Engineer	_____	_____	_____
<input type="checkbox"/> Land Surveyor-in-Training	_____	_____	_____
<input type="checkbox"/> Professional Land Surveyor	_____	_____	_____
<input type="checkbox"/> Other _____	_____	_____	_____

Basis of licensure	Hours	Results	NCEES	Exam date
<input type="checkbox"/> Written exam:				
FE	_____	_____	_____	_____
PE	_____	_____	_____	_____
STR	_____	_____	_____	_____
FLS	_____	_____	_____	_____
PLS	_____	_____	_____	_____
State specific/ Other _____	_____	_____	_____	_____
Exam option (<i>discipline</i>): _____				
<input type="checkbox"/> Oral exam: PE hours _____ PLS hours _____				
<input type="checkbox"/> FE/FLS accepted from: _____				
<input type="checkbox"/> PE/PLS accepted from: _____				

Answer the following

Has any disciplinary action ever been taken against this applicant? Yes No

If yes, has this disciplinary case been satisfied to the board's requirements? Yes No

If no, please explain: _____

Was the NCEES Cut-Score used? Yes No

If no, please explain: _____

Remarks

SEAL

X

State board representative signature _____ Date _____

_____ Title _____