

Geologist License Application

Apply for a geologist license.

Online: https://professions.dol.wa.gov

Or 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 9012 Olympia WA 98507-9012

For questions or language help call: (360) 664-1497

Geologist license requirements

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

- 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 https://www.dol.wa.gov/business/geologist/
- Have at least 5 years of documented, verifiable professional geological experience. At least 3 years must be under the supervision of a licensed geologist.
- 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.
- Be currently licensed in another state, if applying by reciprocity.

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 License Application (sections 1 through 5) with a check or money order payable to the Department of Licensing to our office.
- 2. Complete the Applicant Information section of the Employment and Experience Verification form send to each of the verifiers listed on section 4 of this form. The person verifying will send the completed form directly to our office. 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 and send to your 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, 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. Reciprocity applicants only:** Complete the Applicant section of the Geologist Licensing and/or Exam History Certification and send to the state where you are currently licensed. They will complete the Certification Verification section and return the form to our office.



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All applicants must pay the non-refundable application fee to take an exam.

Fees Geologist ☐ by exam, \$135 fe ☐ by reciprocity, \$27					
Licenses are available for self-p If you want us to print and mail y □ \$0 self-print license online. □ \$5 each. DOL print and mail	your license add a \$5 pr	int fee for			
Personal information					
TYPE or PRINT Name as you would like it to appear on your license				Former name (If applicable)	
Full legal name (First, Middle, Last)			,		
Street address					
City		State	ZIP code	County	
(Area code) Daytime phone number	(Area code) Home phone num	ber <i>(optional</i>)		
Date of birth (mm/dd/yyyy) Social Securi	ty number* (or ITIN, Green Card,	, Canadian S	IN) Email		
Military? (check if applicable)					
Current or former: Military	member \square Military spo	ouse or d	omestic pa	rtner	
If you are applying by reciprocity , indicate state where you passed an exam for licen		ate Date	of original licen	se License number	

*You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have an SSN or ITIN, leave that section blank. If you do have a SSN, ITIN or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

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			ittendance		
Name of college, university, technical school	Location	From	To	Degree	
Applicable education and supplemental training	licable education and supplemental training Location		l tendance To	Certificate/Degree etc.	
Applicable education and supplementantial ling	Location	From		Certificate/Degree etc.	
Legal background		·			
Answer the following					
Answer the questions below. If yo	u answer "Yes," a	ttach a detaile	d explan	ation.	
1. Within the last 5 years, in this s	•		•		
(fine, suspension, revocation, o					
or occupational license, certific					□ No
2. Within the last 5 years, in this s	tate or any other j	urisdiction, ha	ve you d	efaulted, or been	
convicted of, or entered a plea	of no contest to a	gross misdem	neanor or	felony crime?	
(Don't include traffic conviction	s.)				□ No

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

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				
	То	1			
	From				
	То				
	From				
	То				
	From				
	То	-			
	From				
	То	-			
If additional space is required, please atta	ach an 8 1/2"	x 11" sheet	f.		
Certification					
Answer the following 1. Do you agree to abide by all the applications are applications.	cable laws a	nd rules reg	arding the practice of geology and geology specialtie	s? □ Yes	□ No
			and any governmental agencies (local, state, or fede or records which may be required for a background in		□ No
			this application, we may deny, suspend, or revoke yo		□ No
I declare under penalty of perjury under th	he law of Wa	shington the	at the foregoing is true and correct.		
	TYP	E or PRINT Nar	me		
Date and place	Χ	icant signature			

Providing any false information in this application may be cause for denial, suspension, or revocation of your professional license in the State of Washington. GEO-637-001 (R/8/23)WA Page 4 of 4