

VERIFICATION OF LICENSURE AND/OR EXAMINATION

(Only one copy of this form has been provided. Please make additional copies as required.)

TO: TEXAS BOARD OF PROFESSIONAL ENGINEERS
1917 IH 35 South, Austin, Texas, 78741-3702 (512) 440-7723 / FAX: (512) 442-1414

FROM:

(Board name & Address)

(Name of Applicant)

(Street Address)

(City) (State) (Zip)

SOC. SEC. NO.: _____

I. THE ABOVE NAMED PERSON WAS LICENSED AS:

	License Number	Date Issued	Valid Until	Date Applied
<input type="checkbox"/> PROFESSIONAL ENGINEER	_____	_____	_____	_____
<input type="checkbox"/> ENGINEER-IN-TRAINING	_____	_____	_____	_____

II. BASIS OF LICENSURE AND/OR EXAMINATION VERIFICATION:

1. WRITTEN EXAMINATION:

_____ hours NCEES EIT OR FE exam
Date of Exam: _____ Score: _____

_____ hours NCEES PE exam in _____ engineering
Date of Exam: _____ Score: _____

_____ hours NCEES PE exam in _____ engineering
Date of Exam: _____ Score: _____

_____ hours other non-NCEES exam(s)
Date of Exam: _____ Score: _____

EIT/FE ACCEPTED FROM: _____

2. COMITY WITH: _____

3. EDUCATION AND EXPERIENCE: If checked and licensee has less that 8 years experience, Including graduation from ABET engineering curriculum. Please give details on other side.

4. OTHER: (Please give details on other side)

5. Has disciplinary action ever been taken against this licensee? Yes No
If so, please give details on other side, including violation, penalty, and date of disciplinary action.

BY: _____

TITLE: _____

DATE: _____

(BOARD SEAL)