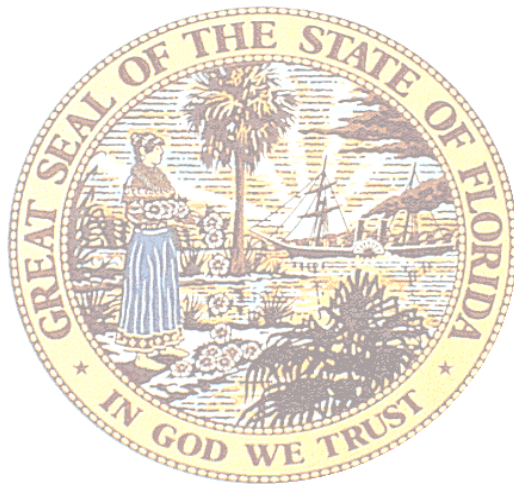


FLORIDA BOARD OF PROFESSIONAL ENGINEERS

2507 Callaway Road, Suite 200
Tallahassee, Florida 32303



APPLICATION FOR LICENSURE BY ENDORSEMENT

BEFORE MAILING YOUR APPLICATION PACKET, PLEASE MAKE SURE THAT YOU HAVE TAKEN CARE OF ALL OF THE FOLLOWING ITEMS.

DO NOT RETURN THIS CHECK LIST TO OUR OFFICE

CHECK LIST

- As you begin the Application process, refer to the instructions – pgs 11-14.**
- Complete the Application in its entirety**
- Complete the Profile Data in its entirety**
- Application has been signed and notarized**
- Attach one (1) current photograph to the application (please do not use staples)
(Copy of your Drivers License)**
- Attach application fee (\$230.00)
(The check must be made payable to the Florida Board of Professional Engineers or FBPE)**
- Complete the top portion of Verification of Licensure and forward to the appropriate States(s). (States in which you took the EI and PE exam) – pg 7**
- Complete top portion of Verification of Education Release and forward to school
– Transcripts are required – pg 8**
- Complete top portion of Employment/Client Verification and forward to Employers must
verify a minimum of 48 months – pg 9**
- Complete top portion of Personal Reference and forward to three PE references – pg 10**
- Complete the Study Guide & return only the bubble answer sheet with your application
package. (This item can be downloaded from www.fbpe.org click on the application link and under the
Endorsement application section, click on Study Guide on Laws and Rules and Answer Sheet.**
- Foreign Degrees (BS) must have a course by course evaluation. See 61G15-20.007.**
- Florida requires an EAC/ABET Engineering Degree. If you hold a TAC/ABET an
RAC/ABET or a CAC/ABET engineering degree you are not qualified for licensure by
endorsement in Florida. Please contact the Board office for more details.
jbelle@fbpe.org.**
- You must provide an email address. All notices are sent via email. Add fbpe.org as a
safe sender.**

You will be notified within thirty (30) days of receipt of your application of incomplete or complete status. Complete files will be reviewed at the next available Application Review Committee Meeting for determination of licensure.

**ORIGINAL PROFILE DATA
FOR PROFESSIONAL ENGINEERS
Licensure by Endorsement
(Joy Bell, Licensure Analyst)**

**FLORIDA BOARD OF
PROFESSIONAL ENGINEERS
2507 Callaway Road, Suite 200
Tallahassee, FL 32303
(850) 521-0500**

1. APPLICANT PROFILE DATA. Please type or print with ballpoint pen, indicate name as you wish it to appear on all licensing documents.

Name	Last	First	Middle	OFFICE USE ONLY	
Mailing Address	Number and Street		Apt/Lot No		Florida PE #: _____
	City	State	Zip Code	County	Issue Date: _____
Home Telephone No. () ()		Business Telephone No. () () Extension #:		Place of Birth (City, State, County)	*Social Security No.

Social Security numbers are mandatory pursuant to Title 42 United States Code, Sections 653 and 654; and Sections 455.203(9), 09.2577, and 409.2598 and 409.2598, Florida Statutes.

Have you ever changed your name through marriage or through action of a court, or have you ever been known by any other name:

YES NO if YES, list name(s) and date(s) of change below:

We are required to ask that you furnish the following information as part of your voluntary compliance with Section 2, Uniform Guidelines on Employee selection Procedure (1978) 43FR38296 (August 25, 1978). This information is gathered for statistical and reporting purposes only and does not in any way affect your candidacy for licensure.

Race: Caucasian African-American Hispanic Asian Native American

Other: _____

Sex: Male Female

Date of Birth: _____

2. EDUCATION: Circle highest grade completed:

College: 1 2 3 4 Graduate School: 1 2 Post Graduate Program: _____

Name & Addresses Of Schools/Colleges Attended:	Did you graduate?		Dates Attended Month/Year	Degree Earned	EAC/ABET Accredited	
	Yes	No			Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Note: List here if enrolled in postgraduate program, check appropriately and list name and address of school.	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Email Address Required:

****The Board Office sends All correspondence to you via email. To ensure you receive all email communications from FBPE immediately, please add fbpe.org to your address book. If your email provider allows, you should also make jbelle@fbpe.org a safe domain for receipt of emails.**

**APPLICATION FOR
Licensure by Endorsement
(Joy Bell Licensure Analyst)
Fee : \$230.00**

**FLORIDA BOARD OF
PROFESSIONAL ENGINEERS**
2507 Callaway Road, Suite 200
Tallahassee, FL 32303
(850) 521-0500

APPLICANT PROFILE DATA Please type or print with ballpoint pen, indicate name as you wish it to appear on all licensing documents.

Name	Last	First	Middle
Mailing Address	Number and Street		Apt/Lot No
	City	State	Zip Code County
Permanent Address: (if different)			
Employment Address	Business Name		
	Number and Street		
	City	State	Zip Code County

**ATTACH
A COPY OF YOUR
DRIVERS LICENSE**

EXAMINATION HISTORY

Have you ever taken a written Engineering Examination in any state or U.S. Territory? YES Number of times did you take each exam? PE? EI?

	WHERE?	WHEN?	HOURS?	RESULTS?	LICENSE NUMBER?
Engineer Intern	_____	_____	_____	_____	_____
Professional Engineer	_____	_____	_____	_____	_____

LICENSURE HISTORY

Do you now hold or have you ever held a license or registration to practice engineering in any state or U.S. Territory? (including Florida If yes, show all such licenses below or use a separate sheet if necessary).

YES NO

State	License No.:	Year Issued:	Type of License:	If License is not in force how and when validity ceased	License Status
_____	_____	_____	_____	_____	_____

APPLICANT HISTORY – GENERAL (ATTACH ADDITIONAL SHEETS IF NECESSARY)

YES NO

A. Have you ever been convicted or found guilty, or entered a plea of guilty or nolo contendere regardless of adjudication, of a crime in any jurisdiction, or have you ever been found guilty by a military court-martial? (Do not include any pending charges or non-criminal traffic offenses). If YES, please list date, jurisdiction (state and county), offense, disposition, and all other relevant information	<input type="checkbox"/>	<input type="checkbox"/>
B. Have you ever been declared legally incompetent in the past five (5) years? If YES, please explain in full on attached sheet(s) including full details as to court, dates and circumstances, and Medical practitioners consulted.	<input type="checkbox"/>	<input type="checkbox"/>
C. Have you ever undergone treatment for the use of drugs, narcotics, or intoxicating liquors in the past five (5) years?	<input type="checkbox"/>	<input type="checkbox"/>
If "C" above is answered YES, please show on additional sheet(s) the relevant dates and circumstances of such treatment along with the names and addresses of the medical practitioners who treated you. in addition, it will be necessary for you to direct each of the practitioners or hospitals that treated you to furnish the board any information the Board may request with respect to such treatment.		

APPLICANT HISTORY – PROFESSIONAL LICENSURE

A. Have you ever been denied the right to take an Engineering examination in any state?	<input type="checkbox"/> YES <input type="checkbox"/> NO
B. Have you ever been refused an Engineering license – or the renewal thereof – in any state?	<input type="checkbox"/> YES <input type="checkbox"/> NO
C. Have you ever had a certificate of registration to practice Engineering revoked, suspended or otherwise acted against (including probation, fine or reprimand) in a disciplinary proceeding in any state?	<input type="checkbox"/> YES <input type="checkbox"/> NO
♦ If "A", "B", or "C" are answered YES, you must provide complete details as to state(s), license number(s), date(s) and relevant circumstances on attached sheet(s).	

PROFESSIONAL ENGINEERS DISCIPLINE

List one discipline you want recorded:

TO BE COMPLETED BY APPLICANT

APPLICANT'S NAME: _____	EXPERIENCE ALLOCATION Listed in months				
EXPERIENCE RECORD: SUMMARY AND DESCRIPTION					
Name and Address of Employer at Time of Employment	(1)	(2)	(3)	(4)	(5)
_____	Non-Engineering Employment	Engineering Experience Prior to Taking the FE Exam	Engineering Experience Subsequent to FE and Prior to PE Licensure	Professional Engineering Experience Subsequent to PE Licensure	Academic Engagement

Date of Employment: From _____ to _____	—	—	—	—	—

List all employment/experience. (**A minimum of four years must be listed at the time of submitting your application.**) All engineering experience after graduation or prior to graduation shall be verified by profession or practicing engineers using the Employment/Client Verification form (pg. 9). Non-engineering experience or periods of unemployment shall be listed but is not required to be verified. List employment beginning with earliest experience. If self employed or are an officer or principal of a company, you are required to submit five client references in lieu of employment verification using page 9 of the application.

Applicant should make explicit statements and defining design work performed and projects for which he/she had full or partial responsibility, including statement of extent and complexity of work preformed. Make as many copies of this form as you need to list employment. Use one form for each work experience.

ENGINEERING REFERENCES. Show below the names and address of at least three (3) engineering references. **(All three must be professional engineers.)** Do not use the same individual to verify employment.

Name	Address	Qualifications
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

The undersigned hereby makes application for licensure by endorsement and affirms that all statements and answers herein contained are true and correct. Any willful falsification of any information contained in this application or attached documents are grounds for disqualification.

APPLICANT SIGN HERE: _____ **DATE:** _____

STATE OF (_____) **ACKNOWLEDGED BEFORE ME**
COUNTY OF ((_____) **THIS** **DAY OF** _____, 20

/s/ _____ **MY COMMISSION EXPIRES:** _____

FLORIDA BOARD OF PROFESSIONAL ENGINEERS

ATTENTION: Joy Bell
 2507 CALLAWAY ROAD, SUITE 200
 TALLAHASSEE, FLORIDA 32303
 (850) 521-0500

**VERIFICATION OF LICENSURE
 ENDORSEMENT**

**FROM STATE VERIFYING
 LICENSURE/EXAMINATION**

(PLEASE WRITE THE NAME OF THE STATE COMPLETING DOCUMENT)

**TO: FLORIDA BOARD OF
 PROFESSIONAL ENGINEERS
 2507 CALLAWAY ROAD SUITE 200
 TALLAHASSEE, FLORIDA 32303**

Date _____

Name of Applicant _____

Street _____

City _____ State _____ Zip _____

Date of Birth _____

THE ABOVE NAMED PERSON WAS CERTIFIED OR REGISTERED AS:

	CERTIFICATE NUMBER	DATE ISSUED	VALID UNTIL	DATE APPLIED
Engineer Intern	_____	_____	_____	_____
Professional Engineer	_____	_____	_____	_____

BASIS OF REGISTRATION:

1. Written Examination

	Exam Date	Number of hours of Exam?	Pass / Fail	NCEES Exams?	Number of Exams Taken
Engineer Intern (Fundamental)	_____	_____	_____	_____	_____
Professional Engineer	_____	_____	_____	_____	_____

Examination Option : _____

2. EI Accepted From: _____

PE Accepted From: _____

III. REMARKS:

BY: _____

TITLE: _____

(BOARD SEAL REQUIRED)

DATE: _____

Verification of Education Release For Licensure by Endorsement

Please complete all information pertaining to the Institution and yourself, and send it to the Institutions you attended. **PLEASE TYPE OR PRINT LEGIBLY.**

Name and Address of Institution:

Name and Address of Applicant:

Social Security No.: _____

Date of Attendance: _____

Degree Awarded: _____

Date Degree Awarded: _____

Discipline: _____

I am making application to the Florida Board of Professional Engineers for registration as a Professional Engineer. With this understanding, I request confirmation of this information by completion of this document. Please forward this document, along with an official copy of my transcript, to the Attention of Andrea Becraft, Licensure Analyst, Florida Board of Professional Engineers, 2507 Callaway Road, Suite 200, Tallahassee, Florida 32303.

Signature of Applicant: _____ Date: _____

TO BE COMPLETED BY THE INSTITUTION ONLY

This is to certify that _____ D.O.B. _____ received
his/her _____ Degree/Degrees, with a major in the
_____ Discipline, on _____
from _____

Signature of Registrar _____ Date _____

**RETURN THIS DOCUMENT
(SCHOOL SEAL REQUIRED)
AND TRANSCRIPT TO:**

**ATTENTION: Joy Bell Florida Board of Professional Engineers
2507 Callaway Road, Suite 200
Tallahassee, FL 32303**

(850) 521-0500 FLORIDA BOARD OF PROFESSIONAL ENGINEERS

ATTENTION: Joy Bell
 2507 CALLAWAY ROAD, SUITE 200
 TALLAHASSEE, FLORIDA 32303
 (850) 521-0500

**EMPLOYMENT/CLIENT VERIFICATION FOR LICENSURE BY
 ENDORSEMENT**

 Name of Applicant

 Name of Company

 Street Address

 Name of Person Completing Document

 City, State, Zip Code

 Street Address

 Date of Birth

 City, State, Zip Code

 Telephone No.

 Telephone No.

Indicate date document was forwarded to reference: _____

I have given your name as an employer/client and have submitted to the Board of Professional Engineers a signed, sworn and notarized Certification of Release Statement authorizing "any individual, company or institution with whom I have been associated with, to furnish the Florida State Board of Professional Engineers with any information concerning my qualifications for professional registration in Florida which they have on record or otherwise, and do hereby release the individual, company or institution and all individuals connected therewith from all liability for any damage whatsoever incurred by me as a result of their furnishing such information."

Will you kindly furnish from your company records; the information requested below and send the completed document directly to the Board of Professional Engineers.

 Applicants Signature

1. The above applicant is/was employed/in contract with this company from _____ to _____.
2. During his/her employment/contract the applicant has worked with me/for me from _____ to _____.
3. I know the applicant has been engaged in engineering for _____ years.
4. I know the applicant has been in an increasing level of responsibility of engineering for _____ years.
5. Please comment on the applicant's engineering work as indicated in question #3 and #4 for the above outlined time frame as to:
 - A. Experience: _____
 - B. Ability: _____
 - C. Competency: _____

TO BE COMPLETED BY REFERENCE:

To the best of my knowledge, the above is true and correct. Please indicate your status below.

- Licensed Professional Engineer** **Practicing Engineer (Chapter 471.003(2))**
 Client _____

State(s) of Registration _____ **(PE SEAL Required)**

Reference Signature _____

Date and Title/Position _____

FLORIDA BOARD OF PROFESSIONAL ENGINEERS

ATTENTION: Joy Bell
2507 CALLAWAY ROAD, SUITE 200
TALLAHASSEE, FLORIDA 32303
(850) 521-0500
PERSONAL REFERENCE FOR LICENSURE BY
ENDORSEMENT

 Name of Applicant

 Name of Reference

 Street Address

 Street Address

 City, State, Zip Code

 City, State, Zip Code

 Date of Birth

 Telephone No.

Indicate date document was forwarded to reference: _____

I have given your name as reference and have submitted to the Board of Professional Engineers a signed, sworn and notarized Certification of Release Statement authorizing "any individual, company or institution with whom I have been associated with, to furnish the Florida State Board of Professional Engineers with any information concerning my qualifications for professional registration in Florida which they have on record or otherwise, and do hereby release the individual, company or institution and all individuals connected therewith from all liability for any damage whatsoever incurred by me as a result of their furnishing such information."

Will you kindly furnish the information requested below and forward the completed document directly to the Board of Professional Engineers.

 Applicant's Signature

1. I have known the above applicant for _____ years.
2. I know the applicant is or was engaged in engineering for _____ years at _____.
 (name of company)
3. I know the applicant has been in an increasing level of responsibility of engineering for _____ years.
4. Please comment on the applicant's engineering work as indicated in question #3 for the above outlined time frame as to:
 - A. Experience: _____
 - B. Ability: _____
 - C. Competency: _____

TO BE COMPLETED BY REFERENCE:

To the best of my knowledge, the above is true and correct.

Licensed Professional Engineer

State(s) of Registration _____

(PE SEAL Required)

Registration # in Principal State _____

Reference Signature _____

Date and Title/Position _____

APPLICATION

Attach one photograph to the application. Please do not use staples. Print your name in Section 1, as you want it to appear on your license. Once this application has been submitted to the Board Office, we cannot change your record.

Your engineering experience must be listed consecutively and should correspond to the dates on the Employment Verification. There must not be any lapse of time in your experience record. All time engineering or non-engineering related must be listed including periods of unemployment. Non-engineering experience will not require verification unless requested by the Board. Use the Employment Verification to verify experience. If verification becomes impossible, a notarized letter should be submitted listing the company name the date of employment and an explanation of the difficulties in securing the verification.

Below is a description of how Section 7 of the **APPLICATION** should be completed:

You are required to list your experience and verify the experience. A copy of the experience rule is provided so that you can review the criteria for qualification. Page 5 (section 7) is the form that is to be completed for each period of experience/employment. Engineering and non-engineering must be addressed by completion of a form. Engineering experience must be verified by a Professional or Practicing Engineer using the Employment/Client Verification form. If experience listed is not engineering; a verification of employment is not required. You may duplicate this form to ensure sufficient copies. Remember the importance of addressing all time frames in a continuous and consecutive order.

You must complete the entire application. Answer all questions.. All past and present employment experience must be listed and printed or typed legibly. All persons serving as Personal References must be listed in Section 8 on page 6 and cannot be the same as those who verified employment/experience. If your application is not complete or is not legible, **it will not be accepted and will be returned to you.**

ORIGINAL PROFILE DATA

Print your name as you wish it to appear on your license. It must be the same as it appears on the Application. You are required to answer All questions on this document. Attach one (1) your check, made payable to the Board of Professional Engineers, for \$230.00 to this document.

BOARD OF PROFESSIONAL ENGINEERS INSTRUCTIONS FOR APPLICATION FOR LICENSURE BY ENDORSEMENT

In order to qualify for Licensure by Endorsement, you must meet the qualifications listed in Chapter 471, Florida Statutes, (F.S.) and Rule 61G15, Florida Administrative Code (F.A.C.) in regards to educational requirements and examinations completed and/or qualifications for waiver of examinations based on education and experience. Endorsement applications are processed by our office staff and are reviewed by the Board's Application Committee at such time as they are deemed complete. Licensure follows for those applicants, which are approved by the Application Committee. If you are denied Licensure by Endorsement, you will be advised of your alternatives. Please refer to the **Application Instructions** section for instructions on completing the application packet.

This application packet should contain the following items:

- Application
- Original Profile Data
- Verification of Education Release
- Personal Reference
- Employment Verification
- Verification of Licensure
- Chapter 471, Florida Statutes and Rule 61G15, Florida Administrative Code.
- Laws and Rules Study Guide

APPLICATION INSTRUCTIONS

VERIFICATION OF EDUCATION RELEASE

Send this document directly to the institution from which you received your engineering degree(s). The institution(s) will complete this document and forward it, along with a certified transcript, directly to the Board Office. (If a document is returned to us from an institution without the transcript, it will be returned to you.)

NOTE: In order to qualify for licensure in Florida, you are required to evidence an Engineering Accreditation Commission/Accreditation Board for Engineering Technology (EAC/ABET) accredited degree. If you hold a TAC/ABET, a RAC/ABET, or a CAC/ABET Engineering degree **you are NOT qualified for licensure by Endorsement in Florida**. Contact the Board if you have questions concerning your degree. If you hold a foreign BS degree or Domestic non EAC/ABET engineering degree, you are required to have an evaluation completed by one of the approved providers of the Florida Board.

PERSONAL REFERENCE

Make three (3) copies of this document and send one to each of the individuals serving as personal references. All **must be** registered professional engineers. List these individuals' names and addresses in Part 8 of the Application Document. **Personal references cannot be used to verify engineering experience.**

EMPLOYMENT VERIFICATION

Make copies of this document and send one to each of your past and present employer(s), that is an engineer that will be verifying your engineering experience pursuant to Rule 61G15-20.002(2). List all of your past employment history. List your employment history in chronological order with your first date of employment and progressing to your present employment.

Note: If self-employed, you need to submit this document to at least five different clients that have employed your engineering services.

Note: Complete the top of each document before mailing. The individual must indicate at the bottom of the document whether they are Licensed Engineers or practicing Engineers or a Client.

VERIFICATION OF LICENSURE

Complete the first section of this document and forward a copy to the most current state in which you are registered and to the states in which you have completed a licensing examination (the Fundamental of Engineering and the Principles and Practice Examination). Fill in the date; your complete name, address, and your certificate number or registration number. This document must be returned to the Florida Board of Professional Engineers by the state completing the Verification of Licensure Document.

Note: Under the Federal Privacy Act, disclosure of Social Security numbers is voluntary unless specifically required by Federal statute. In this instance, social security numbers are mandatory pursuant to Title 42 United States Code, Sections 653 and 654; and sections 455.203(9), 455.213(1), 409.2577, and 409.2598, Florida Statutes. Social Security numbers are used to allow efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations. Social security numbers must also be recorded on all professional and occupational license applications and will be used for licensee identification pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Welfare Reform Act), 104 Pub.L.193, Sec. 317.

STUDY GUIDE ANSWER SHEET
CHAPTER 471, F.S., RULE 61G15, F.A.C.,
LAWS AND RULES STUDY GUIDE QUESTIONNAIRE
53 Questions on the Florida Laws & Rules

Please read Chapter 471, F.S. and Rule 61G15, F.A.C. to become aware of the rules regulating the engineers in the State of Florida. Please complete the study guide and return only the answer sheet with your application. Retain your copy of the Florida Laws and Rules for future reference.

NOTE: Registered Professional Engineers are persons holding professional engineering registration in any state.

Practicing Engineers are those persons in the engineering professions who are not required to be licensed in their state.

Refer to Rule 61G15-21.002(2)(a), F.A.C. for additional information.

**If you have any questions concerning Licensure by Endorsement,
 Contact
 Joy Bell, Licensure Analyst**

**Florida Board of Professional Engineers
 2507 Callaway Road, Suite 200
 Tallahassee, Florida 32303
 (850) 521-0500
 E-mail: jbelle@fbpe.org**