

Professional Engineering Form 3

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Office of the Professions
Division of Professional Licensing Services
89 Washington Avenue
Albany, NY 12234-1000

NOTE: Licensure or registration in another jurisdiction is not a requirement for licensure in New York.

VERIFICATION OF OUT-OF-STATE LICENSURE, REGISTRATION AND/OR EXAMINATION

(Must be filed by all applicants who are or have been licensed in another jurisdiction or want to verify passing parts of the licensing examination in another state)

APPLICANT INSTRUCTIONS

Complete Section I. Be sure to sign and date item 8.

A. Verification of Examination(s) for Licensure

- If you are applying for admission to the Principles and Practice Examination and have passed the Fundamentals Examination in another jurisdiction, send this form to that jurisdiction and request that they complete Section II and forward directly to the address at the end of this form*.
- If you are applying for licensure on the basis of endorsement of your examination grades, send this form to the jurisdiction(s) where you took and passed the licensing examination(s) and to the jurisdiction where you are currently licensed and registered and ask that they complete Section II and send directly to the address at the end of this form*.

B. Verification of Licensure/Registration for a Limited Permit.

- If you are applying for a Limited Permit, complete Section I and send this form to the jurisdiction where you currently reside and are legally qualified to practice and ask they complete Section II and send directly to the address at the end of this form*.

* Be sure to include any fee required by the licensing authority.

SECTION I: APPLICANT INFORMATION

1 Print Full Name Exactly As It Appears On Your Licensure Application (Form 1)

Last

First

Middle

3 Social Security Number:

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(Leave this blank if you do not have a U.S. social security number)

2 Mailing Address

Line 1

Line 2

Line 3

City

State Zip Code

Country/Province

4 Birth Date

mo. day yr.

5 I am applying for: (check one) NYS license Limited Permit

6 If licensed by examination in the United States, give state or territory: _____

7 Print or type your name in the exact form in which the engineering license was issued:

8 To the Engineering State Board of: _____

Check Appropriate boxes:

I hereby make application for the transfer of examination grades and related information.

I am a licensed Engineer of your state. License number: _____ Date issued: ____/____/____
mo. day yr.

I request and give permission to the licensing authority above to complete the information on this form and send any documentation requested, including that requested on this form, to the New York State Education Department.

Signature of applicant: _____ Date ____/____/____
mo. day yr.

SECTION II: CERTIFICATION OF LICENSURE/EXAMINATION

INSTRUCTIONS TO LICENSING AUTHORITY OFFICIAL: Complete Section II, sign this form, and mail it directly to the Office of the Professions at the address at the end of this form.

1

Print or type the name of the applicant in the exact form in which engineering registration was issued: *(If different from name in Section I)*

2

Record of Examination.

a. For Fundamentals of Engineering: (Check One)

Written Examination in your state.

Hours _____ Grade _____ Date ____/____/____
mo. day yr.

NCEES exam? Yes No

Endorsement of examination taken in another state or territory.

Waiver of written examination based on: (Check all that apply)

Accredited engineering degree.

Oral examination. Hours _____ Date ____/____/____
mo. day yr.

Demonstrated proficiency in engineering over a period of _____ years.

Other (Specify): _____

b. For Principles and Practice of Engineering: (Check One)

Written Examination in your state or territory. Discipline: _____

Hours _____ Grade _____ Date ____/____/____
mo. day yr.

NCEES exam? Yes No

Endorsement of examination taken in another state or territory State or territory: _____

Waiver of written examination based on: (Check all that apply)

Oral examination. Hours _____ Date ____/____/____
mo. day yr.

Demonstrated proficiency in engineering over a period of _____ years.

Other (Specify): _____

3

a. If the applicant holds a current license to practice engineering in your state, what is his/her:

License number _____ Date issued _____ Expiration date of most recent registration _____

b. Was there ever any disciplinary action against this license?

YES NO

If so, please explain _____

c. Are any disciplinary charges pending against this license?

YES NO

If so, please explain _____

4

ATTESTATION

I certify that to the best of my knowledge and belief the foregoing is a true statement of the record of the applicant named on this form. I further certify that, other than those listed above or in attached correspondence, this licensing authority has never taken any disciplinary action against this person and that, in so far as the licensing authority has knowledge, there have been no charges preferred nor has any information been presented to the licensing authority relating to any question of unprofessional or immoral conduct except as noted in question 3 above.

Signature _____ Date _____

Print name _____

Title _____

Agency _____

Address _____

Telephone _____ Fax number _____

E-mail _____

(LICENSING AUTHORITY SEAL)

Return Directly to: New York State Education Department, Office of the Professions, Division of Professional Licensing Services, Professional Engineering Unit, 89 Washington Avenue, Albany, NY 12234-1000.