

Section II: Experience Detailed (To be completed by the Applicant)	Endorser Number <hr/> (from Form 4)	Page <hr/> of <hr/>
Type or print legibly. Attach additional sheets if necessary. Please note: The information provided below, in Section II may be released if requested under New York Public Officers Law, Article 6 - "Freedom of Information Law."		
Describe in detail the specific geologic work you personally performed on several projects or job assignments that are representative of the work you performed while you were employed by the firm/organization named in Section I, item 6. Include a brief description of your responsibility and/or authority for the work described for this endorsement. Explain any changes in your title resulting from promotions or other job changes during this period of employment. Last, indicate at right, the time you spent on these projects or assignments. The total time you claim cannot exceed actual calendar time. Describe your work in sufficient detail. You must use a separate Form 4A for each individual endorser (even if two or more endorsers work in the same firm).		
	Time	
	Years	Months
Total Time this sheet:		
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Section II: Experience Detailed (Continued)

**Endorser
Number**

(from Form 4)

Page

of _____

Time

Years

Months

Total Time this sheet:

Total time this endorser*:

***Be sure you enter the total time of work experience with this endorser here and on the appropriate endorser line on Form 4.**

Attestation

I hereby certify that the work experience described on this form and the time claimed for that experience is true and accurate.

Applicant's signature

Date

Print Name

Section III: Endorser Verification

Instructions to Endorser

1. Carefully read the information presented by the applicant on this form and any attached sheets.
2. Complete this Section. Please note: the information provided in Section III, questions 1-8 may be released if requested under New York State Public Officers Law, Article 6 - "Freedom of Information Law."
3. If you disagree with any information presented by the applicant on this form, or wish to provide any other information for consideration by the Department relative to the applicant, please submit a separate letter with this form. If you do, please identify the applicant by his/her full name and social security number in your letter and indicate the he/she is an applicant for geology licensure.
4. Sign the affidavit below. If you cannot sign the affidavit, please explain in a separate letter attached to this form.
5. Submit all pages of this form and any additional information directly to the Office of the Professions at the address at the end of the form. Do not return this form to the applicant. **This form will not be accepted if submitted by the applicant.**

Applicant Name: _____
(Section I, item 3)

Endorser's Name: _____

Firm/Organization: _____

Position in Firm/Organization: _____

Current Business Address: _____

Business Telephone Number: _____ Business E-mail Address: _____

Are you a Professional Geologist? Yes No

If "yes", Jurisdiction: _____ License Number: _____ Date of Licensure: _____ / _____ / _____
mo. day yr.

Are you a Professional Engineer? Yes No

If "yes", Jurisdiction: _____ License Number: _____ Date of Licensure: _____ / _____ / _____
mo. day yr.

Regarding the Applicant's Description of Professional Experience as Described on This Form:

1. Do you have in-depth knowledge of the applicant's work during the time covered by this endorsement? Yes No
2. Does the description accurately reflect the work personally performed by the applicant? Yes No
3. Is the time claimed by the applicant for this experience accurate? Yes No
4. Was the applicant's work competent, reliable, and professional? Yes No
5. Are/were you the applicant's supervisor during the time period claimed above? Yes No

If "no", please identify your work relationship to the applicant at the time: _____

6. Are you attaching a separate letter with additional information about the applicant? Yes No

7. Comments: _____

Affidavit

I have read the information presented by the applicant on this form. I hereby certify that I am knowledgeable about, and qualified to attest to, the applicant's work and geological ability and that, except as otherwise note on page 1 of this form, or in attached correspondence, the work experience described by the applicant and the time claimed for it, are generally true and accurate.

Endorser's signature _____

Date _____

Print Name _____

I cannot so certify, letter of explanation is attached.

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