

PE Engineers

Application for Additional Branches of Engineering

NOTE: This application is to be completed by Oregon registered professional engineers.

The following instructions are provided to assist in completing the application.

Please read the applicable Oregon Revised Statutes (ORSs) and the Oregon Administrative Rules (OARs). To locate the ORSs and the OARs, visit our website at www.oregon.gov/osbeels. Click on the "Rules & Statutes" link in the top bar to review the relevant ORSs and OARs.

It is the Applicant's responsibility to review these requirements before applying to the Board.

Purpose

The purpose of this application is for Oregon PE registrants who qualify for registration in additional branches of engineering and would like recognition of special qualification in more than one branch of engineering recognized by the Board under OAR 820-010-1010.

See the following OAR for detailed information: OAR 820-010-1000(6).

Application Fees

The application fees are located in OAR 820-080-0010. Application fees are non-refundable, in accordance with OAR 820-080-0005.

How Applications are Processed

Applications will be processed according to the date received by the OSBEELS office.

General Instructions

Step 1 Complete the Application form.

Step 2 Send application package, including payment, to the Oregon State Board of Examiners for Engineering & Land Surveying (OSBEELS):

OSBEELS 670 Hawthorne Ave. SE Suite 220 Salem OR 97301

Oregon	OFFICIAL USE ONLY	OFFICIAL USE ONLY
BOARD OF EXAMINERS FOR ENGINEERING & LAND SURVEYING	DATE RECEIVED	DATE PAID
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Form A: Applicant Information			
First Name	Middle Name or Init	al	Last Name
Name as you want it to appear on your wal	l certificate and used	on your seal. See OAR	820-025-0005.
□ Social Security Number *	Birth Date (M/D/Y)		Address to mail correspondence to
			🗌 Home 🔲 Business 🗌 Public
* If you have a Social Security Number, Oreg	gon law requires that i	t be used. If you don't l	nave a Social Security Number, use Form K.
Home Address (include any unit number)			Home Phone
City	State / Province	Zip / Postal Code	Home Email
Business Name			Business Phone
Business Address (include any suite numbe	er)		Business Fax
City	State / Province	Zip / Postal Code	Business Email
Address and Email for Public Disclosure - C	ORS Chapter 192		Same as Home Address
City	State / Province	Zip / Postal Code	Email
NCEES Records If you are using your NCEES Record as part of this application, you must still complete pages 1-7.			
Have you established an NCEES record?	Yes No If Yes, date transmitted to the Board:		
Indicate how you would like to receive the OSBEELS newsletter, The Oregon Examiner			
🗌 Home Address 🔲 Home Email 🔲 Business Address 🗋 Business Email 📄 Public Address 📄 Public Email			

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Form B: Registration and Pay	ment		
Professional Engineering Registration	ı	Temporary Per	rmit Requested (additional fee applies)
Select branch(es) (must choose at lea	st one): See OAR 820)-010-1010 for approv	red professional engineering exams
Acoustical (1981-2015 exam)	Electrical		🗌 Metallurgical
Agriculture	🔲 Environmental		☐ Mining & Mineral Processing (1960-1992 exam)
Building Systems (Architectural)	☐ Fire Protection		Naval Architecture and Marine
Geotechnical *	☐ Forest		🗖 Nuclear
Chemical	🔲 Industrial		Petroleum (1981-1986 exam)
🗖 Civil	Manufacturing (1993-2005 exam)		
Control Systems	🔲 Mechanical		
Payment Method			
Check or Money Order (payable to	OSBEELS)		Amount Enclosed:
Debit or Credit Card (Visa, Mastero	ard, Discover, or AmE	x)	Total Charged:
Card Number	Exp. Date	Security Code **	Billing Zip / Postal Code
Signature (serves as payment authori	zation)		Signature Date (M/D/Y)

* To apply for Geotechnical, you must have passed the CA Geotechnical Engineering exam

** Debit or Credit Card Security Codes

If submitting a payment to OSBEELS for fees by debit or credit card, provide the security code. These codes are a security feature that appears on the back of most Visa, MasterCard, and Discover cards, and on the front of American Express cards. This code is a three or four-digit number which provides a cryptographic check on the information embossed on the card.

American Express Card Users: Look for the 4-digit code printed on the front of the card just above and to the right of the main card number. This 4-digit code is the card security code. Visa, MasterCard, and Discover Card Users: Flip the card over and look at the signature box. A special 3-digit code will be located in the signature box. This 3-digit code is the card security code.



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Yes

□ No

🗌 No

Form C: General Questions

Answer the following questions See OAR 820-020-0045

Have you ever had any criminal convictions? *

Have you ever had a professional engineering, land surveying, or photogrammetric mapping registration denied, revoked, suspended, surrendered, stipulated, on probation, or been subject To any restriction or disciplinary action in any jurisdiction?

If the answer is "Yes" to any of the above stated questions, submit a written explanation and a copy of any and all board orders including but not limited to final orders, letters of reprimand, stipulations, settlement agreements, or criminal conviction and sentencing records, as applicable.

All information provided with your response will be considered public information unless required to be kept confidential by state or federal law.

* You are not required to report any criminal convictions received before the age of 18.

Form D: Verification Summary		
Summarize Active Oregon Registration		
Registration Number	Branch	Renewal Date (M/D/Y)
Summarize Additional Branch of Profession	al Engineering Examination	
Branch of Examination	NCEES Exam or other? (If other, please specify)	Exam Date (M/D/Y)
Jurisdiction		

For examinations passed before October 2010, if the Applicant did not pass the examination in Oregon, official verification must be provided by the NCEES licensing jurisdiction. For examinations passed in October 2010 or later, the Board may verify passage with NCEES.

See the following OAR for detailed information: OAR 820-010-1000.



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Form E: Social Security Guidelines

As part of your application for an initial or renewed occupational, professional or recreational license, certification, or registration issued by OSBEELS, you are required to provide your Social Security number. This is mandatory. The authority for this requirement is ORS 25.785, ORS 305.385, 42 USC § 666 (a) (13). Failure to provide your Social Security number, if you have one, will be a basis to refuse to issue or renew the license, certification, or registration you seek. Additionally, as a state agency, OSBEELS may use your Social Security number for the purpose of debt collection, pursuant to ORS 293.226(4). This record of your Social Security number will be used for child support enforcement, tax administration purposes (including identification), and collection actions only, unless you authorize other uses of the number. Although a number other than your Social Security number appears on the face of the licenses, certificates, or registrations issued by OSBEELS, your Social Security number will remain on file with OSBEELS.

If, the U.S. Social Security Administration has not issued you a Social Security number, these guidelines must be followed:

- 1. Complete and sign an Attestation and Request for Exemption from Social Security Number Requirement Form K;
- 2. You are attesting to the fact that no Social Security number has been issued to you by the U.S. Social Security Administration;
- 3. You are acknowleding that knowingly supplying false information under this section is a Class A misdemeanor, punishable by imprisonment of up to one year and a fine of up to \$6,250.

By providing the following signature, you are agreeing to comply with the guidelines listed above.

Signature Date (M/D/Y)

Form F: Applicant Signature

I hereby certify under penalty of perjury that the information provided on this application is true and correct, and that the accompanying documents, if included, are genuine. I am the Applicant named in this application, I have read the contents thereof and, to the best of my knowledge and belief, the foregoing statements are true and correct in every respect.

Signature	Signature Date (M/D/Y)

Form G: Attestation and Request for Exemption from Social Security Number Requirement

I, a U.S. Social Security number, and agree that if a U.S. Social Security Number is assigned to me, I will report it to the Oregon State Board of Examiners within 30 days. I understand that, under Oregon law, providing false information is grounds for denial, suspension, or revocation of registration issued by the Oregon State Board of Examiners for Engineering and Land Surveying.

Signature	Signature Date (M/D/Y)