



PE Engineers / PLS Land Surveyors / RPP Photogrammetrists

Instructions for Filling Out the Application for Registration

NOTE: It is the Applicant's responsibility to compile and submit all documentation required. Failure to do so will delay the application process and may result in determining ineligibility for professional registration.

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

Read the applicable Oregon Revised Statutes (ORSs) and the Oregon Administrative Rules (OARs). To locate the ORSs and the OARs, visit our website at oregon.gov/osbeels. Click on the "Revised Statutes" link for the ORSs. Click on the "Administrative Rules" for the OARs.

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

This application is not to be used for Structural Engineering registration. To apply for Structural Engineering registration, use the Application for Structural Engineering Registration. Note: You must first be a registered Professional Engineer in Oregon before you can obtain registration as a Structural Engineer. However, you may submit both applications at the same time.

Applicable Fees

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

National Council of Examiners for Engineering and Surveying (NCEES) Record

The NCEES Records Program is for individuals who are looking for a simplified approach to complete the licensure process in multiple states. An established NCEES Record will include many of the materials you will need to apply for licensure in Oregon including college transcripts, exam results, experience record and professional references.

Applicants who transmit their records to OSBEELS through the NCEES Records Program (NCEES may charge a transmission fee), should check the "See my transmitted NCEES Record" box at the top of the Education Summary, Exam Summary, Reference Summary, and Experience Summary sections of the application. The remainder of the application must be completed in its entirety.

See the following OARs for detailed information: OAR 820-010-1000, OAR 820-010-2000 and OAR 820-010-3000.

Temporary Permits

OSBEELS may issue a temporary permit to an individual meeting the necessary qualifications to practice engineering or photogrammetric mapping in Oregon upon application for registration, only if the applicant is a registered professional in another jurisdiction.

See the following ORSs and OARs for detailed information: ORS 672.109; ORS 672.127; and OAR 820-080-0010.



Additional General Information

Applying for registration as a Professional Engineer

See the following OARs for detailed information: OAR 820-010-1000; OAR 820-010-1010; and OAR 820-010-1020.

Applying for registration as a Professional Land Surveyor

See the following OARs for detailed information: OAR 820-010-2000; OAR 820-010-2010; and OAR 820-010-2020.

Applying for registration as a Professional Photogrammetrist

See the following OARs for detailed information: OAR 820-010-3000; OAR 820-010-3010; and OAR 820-010-3020.

How Applications are Processed

Applications will be processed according to the date received by the OSBEELS office. Complete and qualifying applications will be presented to the Board for final approval. Correspondence from the Board office will be sent by mail.

General Instructions

- Step 1 Complete the Application form.
- Step 2 Gather the completed forms and documents and put together in a single package for mailing.
- Step 3 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

If additional information is needed to complete your application, you will be contacted by the Board office.



Oregon

BOARD OF EXAMINERS
FOR ENGINEERING &
LAND SURVEYING

OFFICIAL USE ONLY

DATE RECEIVED

OFFICIAL USE ONLY

DATE PAID

OFFICIAL USE ONLY

ID NUMBER

PE Engineers / PLS Land Surveyors / RPP Photogrammetrists

Application for Registration

Form A: Applicant Information

First Name	Middle Name or Initial	Last Name

Name as you want it to appear on your wall certificate and used on your seal. See OAR 820-025-0005.

<input type="checkbox"/> Social Security Number *	Birth Date (M/D/Y)	Address to mail correspondence to <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Public

*** If you have a Social Security Number, Oregon law requires that it be used.** If you don't have 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 number)	Business Fax

City	State / Province	Zip / Postal Code	Business Email

Address and Email for Public Disclosure - ORS Chapter 192	<input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, date transmitted to the Board:

Indicate how you would like to receive the OSBEELS newsletter, *The Oregon Examiner*

<input type="checkbox"/> Home Address	<input type="checkbox"/> Home Email	<input type="checkbox"/> Business Address	<input type="checkbox"/> Business Email	<input type="checkbox"/> Public Address	<input type="checkbox"/> Public Email
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Form B: Registration and Payment

Professional Engineering Registration

Temporary Permit Requested (additional fee applies)

Select branch(es) (must choose at least one): See OAR 820-010-1010 for approved professional engineering exams

- Acoustical (1981-2015 exam)
- Agriculture
- Building Systems (Architectural)
- Geotechnical *
- Chemical
- Civil
- Control Systems
- Electrical
- Environmental
- Fire Protection
- Forest
- Industrial
- Manufacturing (1993-2005 exam)
- Mechanical
- Metallurgical
- Mining & Mineral Processing (1960-1992 exam)
- Naval Architecture and Marine
- Nuclear
- Petroleum (1981-1986 exam)

Professional Land Surveying Registration

Professional Land Surveyor See OARs 820-010-2000; 820-010-2010; 820-010-2020

Professional Photogrammetrist Registration

Temporary Permit Requested (additional fee applies)

Professional Photogrammetrist See OARs 820-010-3000; 820-010-3010; 820-010-3020

Payment Method

Check or Money Order (payable to OSBEELS)

Amount Enclosed:

Debit or Credit Card (Visa, Mastercard, Discover, or AmEx)

Total Charged:

Card Number

Exp. Date

Security Code **

Billing Zip / Postal Code

Signature (serves as payment authorization)

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.



Form C: General Questions

Answer the following questions See OAR 820-020-0045

Have you ever had any criminal convictions? * Yes No

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? Yes No

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: Education Summary

Table with 4 columns: Name of University / Institution, Attended (M/Y to M/Y), Graduation Date, Degree Received. It contains four rows for entering education details.

To go along with Form D: Education Summary you will also need to provide one of the following:

Official Transcripts from each University / Institution listed

For each university / institution listed above, you must request an official transcript. These transcripts must be kept in their original and unopened envelopes and must be included in the package when it is submitted to OSBEELS. OSBEELS will not accept photocopies and/or opened transcripts.

NCEES Credentials Evaluation

For each university / institution listed above that requires your degree to be evaluated by NCEES Credentials Evaluations per OAR 820-010-1020, OAR 820-010-2020, or OAR 820-010-3010, this evaluation must be completed before applying for registration. This evaluation will be performed at your expense and you're responsible for submitting all necessary information to NCEES for evaluation services.

See my transmitted NCEES Record



Form E: Verification Summary

Summarize Fundamentals Examination

See my transmitted NCEES Record

Type of Examination (FE, FLS)

NCEES Exam or other? (if other, specify)

Exam Date (M/D/Y)

Jurisdiction

Summarize Professional Examination

Type of Examination (PE, PLS, RPP)

NCEES Exam or other? (if other, specify)

Exam Date (M/D/Y)

Jurisdiction

Summarize Additional Examination(s)

Type of Examination (PE, PLS, RPP)

NCEES Exam or other? (if other, 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 will verify passage with NCEES.

Copies of your certificate approval letter, or verification are not sufficient to meet the requirements of this rule.

See the following ORS and OARs for detailed information: ORS 672.102, ORS 672.115, ORS 672.123, OAR 820-010-1000, OAR 820-010-2000, OAR 820-010-3000.



Form F: Reference Summary

Summarize your references, provide a minimum of five names; at least three must be registered professionals

- See my transmitted NCEES Record (do not complete F or F-1 Forms)
- I've attached F-ADD Form listing additional references

Reference #1 Name	Daytime Telephone	License Type
Email Address	License Number	Jurisdiction of Registration
Reference #2 Name	Daytime Telephone	License Type
Email Address	License Number	Jurisdiction of Registration
Reference #3 Name	Daytime Telephone	License Type
Email Address	License Number	Jurisdiction of Registration
Reference #4 Name	Daytime Telephone	License Type
Email Address	License Number	Jurisdiction of Registration
Reference #5 Name	Daytime Telephone	License Type
Email Address	License Number	Jurisdiction of Registration

To go along with Form F: Reference Summary, you must also complete and have each reference listed above (and on F-ADD Form) complete a copy of Form F-1: Reference Details:

Form F-1: Reference Details

All five references must attest to the Applicant's ability, professional experience, or both. All five references must complete the Reference Details form provided by the Board and submit the completed Reference Details form directly to the Applicant, in a closed and sealed envelop, signed across the sealed flap by the reference, as required by OAR.

See the following OARs for detailed information: OAR 820 Division 5; OAR 820-010-1000; OAR 820-010-2000; and OAR 820-010-3000.



Form G: Experience Summary

List your experience in order by date, beginning with your most recent or current position. Include additional sheets if needed.

<input type="checkbox"/> See my transmitted NCEES Record (do not complete G or G-1 Forms)		Work in engineering, land surveying, or photogrammetric mapping*	
Employer / Company Name	Start Date (M/Y)	# Years	# Months
Position Held	End Date (M/Y)		
Employer / Company Name	Start Date (M/Y)	# Years	# Months
Position Held	End Date (M/Y)		
Employer / Company Name	Start Date (M/Y)	# Years	# Months
Position Held	End Date (M/Y)		
Employer / Company Name	Start Date (M/Y)	# Years	# Months
Position Held	End Date (M/Y)		
Employer / Company Name	Start Date (M/Y)	# Years	# Months
Position Held	End Date (M/Y)		
Employer / Company Name	Start Date (M/Y)	# Years	# Months
Position Held	End Date (M/Y)		
		# Years	# Months
Total of All Experience Listed			

To go along with Form G: Experience Summary you must also complete:

Form G-1: Experience Details

* Definitions can be found in OARs 820-005-0036; 820-005-0051; and 820-005-0066.



Form H: Applicant Attestation

To the best of my knowledge, I attest that the work experience provided in my application was performed in accordance with any applicable licensing laws and rules in each respective jurisdiction.

Signature

Signature Date (M/D/Y)

Form I: 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 acknowledging 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

Signature Date (M/D/Y)

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

I, _____ attest and certify that I have not been assigned 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)



PE Engineers / PLS Land Surveyors / RPP Photogrammetrists

F-1: Reference Details

NOTE: References need to have knowledge of your engineering technician, land surveying technician, or photogrammetric mapping technician work (if applicable) and engineering, land surveying, or photogrammetric work. Provide a minimum of five references; at least three must be registered professionals.

To go along with Section F: Reference Summary and Section F-ADD: Additional References you must fill out the Applicant Information section below before delivering it to the reference for completion. Make sure the number used for their summary information in Section F of the Application form or on form F-ADD matches the number you write in the space above. When the reference returns this form to you put the original, unopened, and signed envelope in the package for mailing.

Applicant Information			
Applicant Name	Home Phone	Business Phone	Email
Address where reference should mail completed form (include any unit number)			Phone
City	State / Province	Zip / Postal Code	Country
Applying for: <input type="checkbox"/> Professional Engineering Registration <input type="checkbox"/> Professional Land Surveying Registration <input type="checkbox"/> Professional Photogrammetry Registration		Discipline of Engineering applying for: (i.e. civil, mechanical, electrical, etc.)	
Type of Employment	Start Date (M/Y)	End Date (M/Y)	
<input type="checkbox"/> Full time <input type="checkbox"/> Part time			
Name of Employer / Company Referenced	Phone	Address	
Applicant's Position:	Reference's Position:		
Applicant's duties and responsibilities			



PE Engineers / PLS Land Surveyors / RPP Photogrammetrists

F-1: Reference Details - Instructions for Reference

Your name appears as a reference that can attest to the Applicant's ability and professional experience, or both (as indicated in "Applicants duties and responsibilities" on page 1 of 5 of this form). In addition to the written record completed by the Applicant, the Board needs the testimony of those who can, from personal knowledge, attest to the competency of the Applicant in the field of practice for which the Applicant has applied. Thus, the Board respectfully requests your assistance in fulfilling its responsibility to the extent of asking you to answer all the questions on this form.

You must complete the following sections and return this entire form to the Applicant in a closed and sealed envelope. You must sign your name across the sealed flap on the return envelope.

Reference Information

Reference Name			Home Phone
Jurisdiction of current registration			PE / PLS / RPP License #
Issue Date		Expiration Date	
Name of Current Employer / Company			Field of Practice
Position at Employer / Company	Employer / Company Phone Number		Employer / Company Fax Number
Employer/Company Address			Current Email
City	State / Province	Zip / Postal Code	Country

Describe the type of business of the employer / company referenced and the nature of your professional relationship with the applicant.

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Reference Information

Is the information stated by the Applicant (on page 1 of this form) correct as stated?

Yes No

I do not have adequate knowledge to reply

If NO, explain: (In particular, note the stated time periods, duties, responsibilities, and relationship of the Applicant to you.)

Indicate when you had knowledge of the Applicant's engineering, land surveying, or photogrammetric mapping work.

Start Date (M/Y)

End Date (M/Y)

Comments:

Were you in direct supervision of the Applicant's work?

Yes No

Supervised from (M/Y)

Supervised to (M/Y)

Describe:

From your personal knowledge indicate your appraisal of the Applicant's potential to practice engineering, land surveying or photogrammetric mapping by placing an "X" in the appropriate boxes below. If "unsatisfactory" box is checked, explain in the comments box.

	Satisfactory	Unsatisfactory	Unknown
Technical Competence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional Judgement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:



Does the Applicant's work meet the definitions as indicated in the ORS 672.005.

Yes No

If NO, explain:

Would you employ the Applicant in a position of trust?

Yes No

If NO, explain:

Review the ORS 672.045, the ORS 672.200, and the rules of Professional Conduct in Division 20 of OAR Chapter 820. Do you have reason to believe that the Applicant has violated any of these standards?

Yes No

If YES, explain:

Do you have any reservations concerning this Applicant?

Yes No

If YES, explain:

Do you recommend that we check further?

Yes No

If YES, explain:



Additional Remarks

The Board requests that you comment on information regarding the Applicant's engineering, land surveying, or photogrammetric mapping work and abilities, and their ability to practice engineering, land surveying, or photogrammetry. Direct your remarks to the field of practice applied for in the section filled out by the Applicant.

Large empty area with horizontal dotted lines for writing additional remarks.

Note: You are responsible for the information you provide as a professional.

Signature	Professional Seal (if applicable)
Signature Date (M/D/Y)	



PE Engineers / PLS Land Surveyors / RPP Photogrammetrists

F-ADD: Additional Reference Addendum

Applicant Name:

Additional Reference

Summarize your additional references

Reference #6 Name	Daytime Telephone	License Type
Email Address	License Number	State of Registration
Reference #7 Name	Daytime Telephone	License Type
Email Address	License Number	State of Registration
Reference #8 Name	Daytime Telephone	License Type
Email Address	License Number	State of Registration
Reference #9 Name	Daytime Telephone	License Type
Email Address	License Number	State of Registration

To go along with Section F: Reference Summary and Section F-ADD: Additional References you must also complete and have each reference listed above complete a copy of Form F-1: Reference Details.

All five references must attest to the Applicant's ability, professional experience, or both. All five references must complete the Reference Details form provided by the Board and submit the completed Reference Details form directly to the Applicant, in a closed and sealed envelope, signed across the sealed flap by the reference.

See the following OARs for detailed information: OAR 820 Division 5, 820-005-0001, OAR 820-010-1000, OAR 820-010-2000, OAR 820-010-3000, and OAR 820-010-4000.



PE Engineers / PLS Land Surveyors / RPP Photogrammetrists

G-1: Experience Details

Applicant Name:

Page _____ of _____

Complete one copy for each Employer / Company listed in Section G of the Application Form.

Experience Details

Employer / Company Name

Start date (M/Y)

End date (M/Y)

Reference Name

Describe in detail, the character of work including specific engineering, land surveying, or photogrammetric mapping duties and responsibilities, the extent of your role(s) and responsibilities, and projects you feel are representative of your work. You may use more than one sheet, if necessary.