

PE Exam Approval Application

1. Registration Qualifications

This PE Exam Application is **ONLY** for candidates who are applying to take an NCEES Principles and Practice of Engineering examination **for the first time in Ohio**. Your initials are required in several locations, and a notarized affidavit is required on Page 4. **An incomplete application cannot be reviewed and will be returned.**

<< Your initials indicate that you have read the Registration Qualifications.

2. Application Type CHOOSE ONLY ONE R.C. 4733.12, R.C. 4733.13, A.C. 4733-19

\$100.00 Ohio Engineer Intern Certification AND PE Exam Approval : REQUIRED if not certified as an Ohio Engineer Intern

\$ 75.00 Ohio PE Exam Approval ONLY : Choose this option if already certified as an Ohio Engineer Intern

An application and fee is required for each exam cycle. The nonrefundable application fee, using check or money order and made payable in U.S. funds to **Treasurer, State of Ohio**, is required. Cash, credit card or online payment is not available. **Applications including cash will be returned.**

<< Your initials indicate that you understand the **nonrefundable application fee** is required by law.

3. Contact, Personal Information

The Board requires your full name as it will officially appear on any subsequent certificate of registration. **IMPORTANT!** Your name on this application, and any subsequent NCEES-administered examination registration, **must be the same.**

YOUR FULL NAME IN U.S. ORDER — FIRST, MIDDLE, LAST — INITIALS MAY BE USED SUFFIX

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MAILING ADDRESS LINE 1
P.O. Box is NOT acceptable

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MAILING ADDRESS LINE 2 >> **ONLY if needed**

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CITY

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U.S. STATE, ZIP

CANADA PROVINCE, POSTAL CODE

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COUNTY >> **REQUIRED if Ohio address**

COUNTRY >> **Only if NOT U.S. or Canada**

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EMAIL ADDRESS

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4. Required Photo

Your **REQUIRED** photograph must be securely attached within this 2" by 2" space.

Passport, or passport-style, photo is requested.

Required, by Ohio A.C. section 4733-17, is a permanent print of your recognizable face not less than ¾" wide.

U.S. SOCIAL SECURITY NUMBER
REQUIRED by Ohio R.C. section 3123.50

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BIRTH DATE >> **MM/DD/YYYY**

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TELEPHONE

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5. Higher Education A.C. 4733-17

IMPORTANT! Non-ABET degrees must be evaluated before applying for an exam approval. Go to www.peps.ohio.gov for Board policy and degree evaluation information. Credit claimed must be supported by an official transcript from the institution. Applications filed without original transcripts cannot be reviewed until transcripts are received. Applications filed with non-ABET degrees cannot be reviewed without receiving an NCEES degree evaluation.

INSTITUTION
College or university

FROM
MM/YY

TO
MM/YY

GRADUATED
MM/YY

DEGREE EARNED
Engineering degree ONLY

6. Engineering exam, licensure information VERIFICATION REQUIRED FOR NON-OHIO EXAM, LICENSE

FE exam

STATE EXAM DATE >> MM/DD/YYYY E.I. CERTIFICATE NUMBER [1]

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Current P.E. licensure LIST NO MORE THAN 3

STATE	P.E. CERTIFICATE NUMBER	EXP. DATE >> MM/DD/YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

PE exam

STATE EXAM DATE >> MM/DD/YYYY P.E. CERTIFICATE NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

PE EXAM DISCIPLINE

7. Surveying exam, licensure information VERIFICATION REQUIRED FOR NON-OHIO EXAM, LICENSE

FS exam

STATE EXAM DATE >> MM/DD/YYYY S.I. CERTIFICATE NUMBER [1]

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Current P.S. licensure LIST NO MORE THAN 3

STATE	P.S. CERTIFICATE NUMBER	EXP. DATE >> MM/DD/YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

PS exam

STATE EXAM DATE >> MM/DD/YYYY P.S. CERTIFICATE NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

[1] **NOTE:** E.I. and S.I., formerly E.I.T. and S.I.T., are Ohio's abbreviations for Engineer Intern and Surveyor Intern. Several states, including Ohio, do not issue engineer intern or surveyor intern numbers.

8. References R.C. 4733.12

Name 5 persons, at least 3 of whom are registered engineers, from whom the Board may request information in regard to your character, experience and professional ability. Do not name your relatives or members of this Board.

1 NAME BUSINESS RELATIONSHIP P.E./P.S. REGISTRATION Number State

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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ADDRESS OCCUPATION

<input type="text"/>	<input type="text"/>
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2 NAME BUSINESS RELATIONSHIP P.E./P.S. REGISTRATION Number State

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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ADDRESS OCCUPATION

<input type="text"/>	<input type="text"/>
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3 NAME BUSINESS RELATIONSHIP P.E./P.S. REGISTRATION Number State

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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ADDRESS OCCUPATION

<input type="text"/>	<input type="text"/>
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4 NAME BUSINESS RELATIONSHIP P.E./P.S. REGISTRATION Number State

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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ADDRESS OCCUPATION

<input type="text"/>	<input type="text"/>
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5 NAME BUSINESS RELATIONSHIP P.E./P.S. REGISTRATION Number State

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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ADDRESS OCCUPATION

<input type="text"/>	<input type="text"/>
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9. Experience A.C. 4733-9

What is the nature and extent of your experience? **Do not list college education.** Make as many copies of this page as needed. If using plain sheets to furnish additional engineering experience, be sure to date and sign each additional sheet. Include title of your position, name and location of employer, character of each employment and degree of responsibility. Explain your engineering experience in sufficient detail to indicate degree of responsibilities and work performed. Have your supervisor complete and sign the supervisor information. If the supervisor is unavailable or unwilling to provide the information, attach a letter to this application with an explanation. **You should only list fulltime employment.**

<p>FROM MM/YY</p> <input type="text"/>	<p>TO MM/YY</p> <input type="text"/>	<p>EXPERIENCE DETAIL Position, employer, location, work responsibilities</p> <div style="border: 1px solid black; height: 200px; width: 100%;"></div>	<p>SUPERVISOR INFORMATION Supervisor must complete</p> <p>NAME</p> <input type="text"/> <p>P.E./P.S. REGISTRATION Number State</p> <input type="text"/> <p>EMAIL >> Optional</p> <input type="text"/> <p>TELEPHONE</p> <input type="text"/> <p>SIGNATURE</p> <input type="text"/> <p>DATE</p> <input type="text"/>
<p>TIME Years Months</p> <input type="text"/>	<p>PERCENTAGE (%) OF TIME Engineering Surveying</p> <input type="text"/>		

<p>FROM MM/YY</p> <input type="text"/>	<p>TO MM/YY</p> <input type="text"/>	<p>EXPERIENCE DETAIL Position, employer, location, work responsibilities</p> <div style="border: 1px solid black; height: 200px; width: 100%;"></div>	<p>SUPERVISOR INFORMATION Supervisor must complete</p> <p>NAME</p> <input type="text"/> <p>P.E./P.S. REGISTRATION Number State</p> <input type="text"/> <p>EMAIL >> Optional</p> <input type="text"/> <p>TELEPHONE</p> <input type="text"/> <p>SIGNATURE</p> <input type="text"/> <p>DATE</p> <input type="text"/>
<p>TIME Years Months</p> <input type="text"/>	<p>PERCENTAGE (%) OF TIME Engineering Surveying</p> <input type="text"/>		

<p>FROM MM/YY</p> <input type="text"/>	<p>TO MM/YY</p> <input type="text"/>	<p>EXPERIENCE DETAIL Position, employer, location, work responsibilities</p> <div style="border: 1px solid black; height: 200px; width: 100%;"></div>	<p>SUPERVISOR INFORMATION Supervisor must complete</p> <p>NAME</p> <input type="text"/> <p>P.E./P.S. REGISTRATION Number State</p> <input type="text"/> <p>EMAIL >> Optional</p> <input type="text"/> <p>TELEPHONE</p> <input type="text"/> <p>SIGNATURE</p> <input type="text"/> <p>DATE</p> <input type="text"/>
<p>TIME Years Months</p> <input type="text"/>	<p>PERCENTAGE (%) OF TIME Engineering Surveying</p> <input type="text"/>		

10. Disciplinary Actions R.C. 4733.20

FELONY, MORAL TURPITUDE Have you been convicted, found guilty, pled guilty or received treatment in lieu of conviction for a felony or any offense involving moral turpitude in Ohio or another U.S. state or jurisdiction?

No Yes If **YES**, provide a written statement, signed and dated, explaining the incident(s) and attach statement(s) and supporting documentation to this application. Documentation should include, but is not limited to, court and police records.

LICENSE, REGISTRATION Have you had a disciplinary action involving a professional or vocational license, or registration, or had an application for the same denied in Ohio or another U.S. state or jurisdiction?

No Yes If **YES**, provide a written statement, signed and dated, explaining the incident(s) and attach statement(s) and supporting documentation to this application.

11. Disclosure Statement, Privacy Notice A.C. 4733-40

DISCLOSURE STATEMENT The State Board of Registration for Professional Engineers and Surveyors is requesting disclosure of information that is necessary to accomplish our statutory purpose as required by Chapter 4733 of the Ohio Revised Code and the Ohio Administrative Code. Failure to provide required information may result in your application approval being delayed or in your application being returned.

PRIVACY NOTICE Most documents and records maintained by the state of Ohio are public records under Ohio law. This means that information submitted to us from you may be subject to disclosure if there is an official public records request. **EXCEPTIONS:** Your U.S. social security number and any college transcripts submitted to the Board are **NOT** public records and cannot be released through a public records request.

<< *Your initials indicate that you have read the Disclosure Statement, Privacy Notice.*

12. Notarized Affidavit R.C. 4733.09

Important! State, county, applicant and notary names, signatures and dates must be completed or application will be returned.

STATE OF COUNTY OF } ss.

I, _____ [APPLICANT PRINTED NAME], being the duly sworn, or affirmed applicant, say that my statements in this application are true to the best of my knowledge and belief.

APPLICANT SIGNATURE DATE SIGNED

Subscribed and sworn, or affirmed, to me this _____ day of _____, _____.

Witness my hand and seal hereon.

NOTARY SIGNATURE MY COMMISSION EXPIRES



Deliver your completed **PE Exam Approval Application** with correct fee to:

Ohio PE EXAM APPROVAL
STATE BOARD OF REGISTRATION FOR
PROFESSIONAL ENGINEERS AND SURVEYORS
50 W BROAD ST STE 1820
COLUMBUS OH 43215-5905

Questions?
EMAIL pes.board@pes.ohio.gov
(877) 644-6364 U.S. TOLL FREE
(614) 466-3651 COLUMBUS METRO