

**TBPELS LICENSE, REGISTRATION, CERTIFICATION  
AND/OR EXAMINATION VERIFICATION**

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TO: TEXAS BOARD OF PROFESSIONAL ENGINEERS AND LAND SURVEYORS  
1917 S. Interstate 35, Austin, Texas, 78741, (512) 440-7723 / FAX: (512) 442-1414

FROM:

(Board Name & Address)

\_\_\_\_\_ (Name of Applicant)

\_\_\_\_\_ (Street Address)

\_\_\_\_\_ (City) (State) (Zip)

LAST 4 OF SSN.: \_\_\_\_\_

**I. THE ABOVE NAMED PERSON WAS LICENSED AS:**

	License/Registration Number	Date Issued	Valid Until	Date Applied
P.E.(Professional Engineer)				
E.I.T. (Engineer in Training)				
R.P.L.S. (Registered Professional Land Surveyor)				
S.I.T. (Surveyor in Training)				
L.S.L.S. (Licensed State Land Surveyor)				

**II. BASIS OF LICENSURE AND/OR EXAMINATION VERIFICATION:**

1. WRITTEN EXAMINATION:

\_\_\_\_\_ hours NCEES exam

Exam Name: \_\_\_\_\_ Date of Exam: \_\_\_\_\_ Score: \_\_\_\_\_

\_\_\_\_\_ hours other non-NCEES exam(s)

Exam Name: \_\_\_\_\_ Date of Exam: \_\_\_\_\_ Score: \_\_\_\_\_

EXAM ACCEPTED FROM:

2. COMITY WITH:

3. EDUCATION AND EXPERIENCE: If checked and licensee has less than 8 years experience, including graduation from ABET engineering curriculum. Please give details on other side.

4. OTHER: (Please give details on other side)

5. Has disciplinary action ever been taken against this individual? Yes No  
If so, please give details on other side, including violation, penalty, and date of disciplinary action.

BOARD NAME:

BY:

TITLE:

DATE:

Additional Information: