



**Texas Board of Professional
Engineers and Land Surveyors**

1917 S. Interstate 35, Austin Texas 78741
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Office Use Only
Trans. # (SIT) 2010
Entity #
Receipt #

**APPLICATION TO RENEW:
SIT CERTIFICATION
Instructions for Filing Application**

A certificate as a surveyor-in-training expires eight years from the date of issuance. All information requested on this form must be clearly printed and legible. Failure to complete any portion of the application form will result in the application not being processed.

A fee of \$15.00 must accompany this application, as a check or money order made payable to the TBPELS. This fee is non-refundable. **No cash will be accepted.**

A new certificate will be mailed to you upon approval of your application. Certificates take a month or more to generate.

General Information

Date _____

Name:

Last _____ First _____ Middle _____

SIT # _____

Preferred Mailing Address:

Residence Street _____

City _____ State _____ Zip _____

E-mail address _____

Business Firm Name _____

Firm License Number _____

Street or P. O. Box _____

City _____ State _____ Zip _____

Telephone Numbers:

Residence (____) _____ Business (____) _____

Date certified as a SIT; _____

Continuing Education Requirement

Board Rule 134.3 requires completion of 32 hours of acceptable continuing education to be completed in order to renew a SIT certification. These hours must have been accrued after the date of certification.

Acceptable continuing education is defined as follows:

Successful completion of Board approved collegiate coursework; participation in programs, seminars, workshops or conferences which provide increased professional knowledge related to the practice of professional land surveying and other continuing education activities which are approved by the Board.

CERTIFICATES OF COMPLETION MUST BE SUBMITTED FOR EACH HOUR LISTED BELOW.

Date Completed	Name of Course or Description of Activity (Indicate which courses are Board Approved)	Hours
Total Hours		

Certification

I hereby certify under penalty that the information contained herein is true and correct to the best of my knowledge, information and belief.

Signature **Date**

Printed Name