

Massachusetts Board of Registration of Professional Engineers and Professional Land Surveyors
PE Reinstatement Application Checklist

All applicants must submit the following items along with the completed application form to DOL:

- ☐ Check or money order in the amount of \$216.00 made payable to “Commonwealth of Massachusetts”
(additional fees will be assessed upon approval of the reinstatement)
(licensure/certification fees will be assessed when all other requirements are met)

- ☐ Documentation of experience, e.g. drawings, calculations, field notes, etc. from the date of originally being registered in Massachusetts to the present time.
(See application instructions for specifics on what can and cannot be submitted)

- ☐ Social Security Number:

(Pursuant to MGL C62C, §47A, the Division of Professional Licensure is required to obtain your social security number and forward it to the Department of Revenue. The Department of Revenue will use your social security number to ascertain whether you are in compliance with the tax laws of the Commonwealth)

Applicants must also have the following items transmitted directly to DOL under separate cover:

- ☐ Transcripts mailed directly to Division of Occupational Licensure (DOL) in a sealed envelope from each college or university that the applicant has attended since having been originally registered in Massachusetts.
- ☐ A “Request for Verification” form sent directly to the Division of Occupational Licensure (DOL) from each **non-Massachusetts** jurisdiction (other than Massachusetts) in which the applicant has taken the NCEES sanctioned Fundamentals Exam or Principles and Practices Exam. (See application instructions)

Please send this page and the completed application form to:

Division of Occupational Licensure
Board of Engineers and Land Surveyors
1 Federal Street, Suite 0600 • Boston, MA 02110

PE REINSTATEMENT APPLICATION INSTRUCTIONS

APPLICATION INFORMATION

AUTHORITY: You are required to provide all the information requested in this form per MGL C112, §81 and 250 CMR. It is the responsibility of the applicant to have read and understood the provisions of these laws, rules, and regulations and the instructions contained herein, before making application.

FORMS: Provide information only in the spaces indicated on the forms. Do not rearrange or alter this form in any way. Applications will be rejected and application fees forfeited if any portion of this form is altered. If additional space is required, make reference to a numbered addendum and title the top of the addendum "Attachment #___".

ORAL EXAMINATIONS: Applicants may be required to submit to an oral examination or interview and to submit experience documentation. The oral examination may address a number of issues, including: quality of experience, responsible charge time, knowledge of engineering principles, familiarity with common practices, etc. The applicant should bring to the interview, copies of research notes, field notes, calculations, work sheets, plans, etc. covering several jobs that demonstrate knowledge and skills associated with a variety of engineering projects as indicated in section 27. There is no fee for oral examinations. The Board, at its discretion, may waive the oral examination.

RULES & REGULATIONS: All applicants are required to have obtained and to understand the provisions of 250 CMR (code of Massachusetts Regulations) prior to completing this application. Copies are available by calling (617) 727-2834 or by accessing the Commonwealth's web page at www.state.ma.us/boards/en.

NON-RESIDENTS: Applicants that do not reside in Massachusetts or whose primary place of practice is in another state are subject to the same requirements as Massachusetts applicants and licensees. Each is required to have a thorough knowledge of the laws, rules and regulations affecting the practice of engineering in the Commonwealth of Massachusetts.

FALSE STATEMENTS: Massachusetts Law provides that applications containing false statements must be rejected regardless of the other qualifications of the applicant.

APPLICATION INSTRUCTIONS

All information appearing on this form must be typewritten or printed. Applications materials must be transmitted via postal mail to the Board. Applications will not be processed if any part of this form is incomplete. Applications will be rejected and application fees forfeited if any portion of this form is altered.

Section 1: Fill in your name as it appears on your birth certificate and appearing with your social security number. This should be the same name as appears on other registrations/licenses for Massachusetts or in other jurisdictions. If you are known by an alias, answer yes to section 16 and supply the information requested.

Section 2: Provide any other name(s) by which you may have been known, such as a maiden name. (see section 16)

Section 3: Provide your current residential address and post office box if applicable.

Section 4: Provide the company name and address of your current employer.

Section 5: Specify where you would like correspondence regarding your application directed.

Section 6: Provide your date of birth.

Section 7: Provide your place of birth, City, State, Zip.

Section 8: Declare your citizenship. If other than the United States, then specify.

Section 9: Provide a daytime and evening telephone number where you can be reached during the processing of the application.

Section 10: to **Section 18:** Check the correct response for each of these background questions. If the answer to any question is YES, then you must provide the Board with a brief narrative describing the specifics. Attachment A has one box for each of these sections as needed.

Section 19: Specify the jurisdiction (state), the date and whether you passed or failed or were disqualified for each NCEES Fundamentals of Engineering examination you have taken. If the exam was not taken in Massachusetts then the enclosed "Request for Verification" form must be forwarded to the state/jurisdiction in which you have taken the FE examination and returned by the jurisdiction directly to the Board.

Section 20: Specify the jurisdiction (state), the most recent date the exam was taken, the number of times the exam was taken (indicate n/a if passed), the hours of the exam, the discipline or branch of the exam and if you passed, failed or were disqualified for each NCEES Principles & Practices of Engineering examination taken. If the exam was not taken in Massachusetts, the enclosed "Request for Verification" form must be forwarded to the jurisdiction in which you took the Principles & Practices examination and returned by that jurisdiction directly to the Board.

Section 21: Indicate the professional organizations of which you are currently a member. List only those organizations that are related to the profession of engineering.

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Section 22: Use this section to list your academic background. If you have not earned a college, university or technical school degree, then your high school data must be provided. Do not list in this section courses of study that were not accredited by an academic institution. These might include short courses, civil service or armed forces schools or similar training, workshops, seminars, etc.

List, chronologically the name and address of each college, university, or technical school attended, the dates of such attendance and the curriculum. If a graduate, list the degree obtained or otherwise list the number of credit hours earned. Graduate work, evening school, and other education for which academic credit is given must be included in the list.

Transcripts are required by the Board for each of the schools that were attended after the date of your original registration in Massachusetts (the remainder of the transcripts are available from your original application). Applicants must not submit transcripts directly to the Board, as these must be received directly from the schools. However, it is the applicant's responsibility to insure that the Board receives the transcript from the school.

Section 23: Use this section to list non-academic or other non-degree academic courses of studies completed after most recent degree. This list should include any course, workshop, seminar, etc. which would demonstrate some additional competency in the disciplines of engineering. Applicant should provide the Board with certificates of completion or other evidence that such courses of study were successfully completed.

Section 24: Use the experience table to list, in chronological order, your employment history since the time of your original registration in Massachusetts (*do not list experience that appeared on your original application for registration*). The period during which your license had lapsed must be clearly identified in the table along with the type of activities performed during that period. If additional entries will be necessary, they must be supplied as an addendum in the same format.

Engagement number one should reflect your most current employment experience. Work backwards from engagement number one to the date you were originally registered to practice in Massachusetts. No record is to be made for work done before the applicant became registered. Table entries should cover periods of employment of a particular nature. If the nature of your position, hence the type of experience, within an employment period changes significantly, use a new key in the table to indicate such experience.

Employment that was not directly related to engineering **MUST** also be included in order to leave no gaps in the complete chronological listing. However, if a number of contiguous engagements were unrelated to engineering/land surveying, you may group them together and designate that period as such. Periods of unemployment, or other gaps should be noted rather than leaving a period of time without explanation. If

part of the chronological experience record includes time spent in military service, the applicant should furnish a completely legible copy of the "Report of Separation from the Armed Forces of the United States of America" as was issued upon discharge. This may be a DD-214 or a WD-AGO Government Form.

Supply one copy of the attached addendum (attachment B) entitled "Experience Engagement Coversheet" for each engagement in the experience table and attach it to the reference materials being submitted for that engagement period. Provide a brief narrative for each section of the cover sheet addressing the referenced matters pertinent for that employment period. Additional copies may be made as required.

Typical duties refer to your specific job functions in the company or firm and the approximate time commitment that accrued to each function you regularly performed. Scope of experience refers to the types of engineering projects with which you were typically involved and the approximate percentage of time that accrued to each. Your level of responsibility should detail to what extent you were entrusted to work independently or conversely the amount of supervision you typically received for specific engagements. Include under scope of experience, the type of responsible charge experience that was involved.

Care must be taken not to claim engineering experience which is actually part of other professional disciplines. For experience keys that claim responsible charge time, provide sufficient details to distinguish that experience as such (see definition for responsible charge). In describing your experience use specific terms, such as: "I designed", "I reviewed", "I recommended", etc. Avoid vague terms, such as: involved with, participated in, etc.

For each engagement period which covers engineering experience, supplemental information **MUST BE FURNISHED** and attached to the appropriate cover sheet for that engagement number. Supplemental information should reflect work actually performed by you or under your direction of engineering projects. It should include copies of research notes, field notes, calculations, work sheets, final plans, reports made by you or under your direction. All supplemental materials should be provided on letter size (8 1/2" by 11") sheets. For copies of bound notebooks, or other fixed size documents, photographic enlargement/reduction to letter size is acceptable. Larger documents that would be unreadable if reduced, should be folded to letter size. The supplemental information package total weight should not exceed one pound. Select representative materials within this limit. Supplemental information becomes the property of the Board and will not be returned.

Select supplemental materials that present a representative picture of the progression of your responsibilities and experience over the breadth of your employment for each engagement. Supply examples of work performed exclusively by you or under your direction. If you were the co-author of a document that is important to your experience record, then circle the part which you personally prepared or add a handwritten

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written explanation thereon describing your contribution, for example: "I supervised the experimental program for this project", or "I performed the technical/investigative research for this work", etc. Do not include bound sets of specifications or contract drawings, for which you were only marginally involved. Focus on quality, not quantity.

Column (a): Enter the number of the engagement, beginning with number 1 as the most recent work and increasing by one for each row of the table. Electronic forms may already be numbered.

Column (b): Experience Categories: Choose one of the following 'three letter acronyms' to represent the most appropriate experience designation for each engagement.

ADM	Administrator: Either supervises and plans the administration of engineering services for a project or is assigned to provide the lead services for a project. The latter refers to an individual who is assigned to provide all or most of the contracting, research, reconnaissance,
CAD	Computer Assisted Drafting person.
CEO	Chief executive officer.
COO	Chief operating officer.
DES	Designer of entire project (Conceptual) or for an identifiable sub project. (Detail type of project.)
MNG	Manager of business operations.
MAI	Maintenance engineer in charge of the maintenance of an operating facility or facilities, or an overall responsibility within the corporate structure. (Detail specifics.)
OWN	Owner of the business or an officer of the corporation, board member, etc.
PRO	Project engineer for total engineering effort or for an identifiable sub project. (Detail type of project)
SAL	Sales engineer where technical skills are an essential part of specifying and/or identifying product or services required by a customer. (Detail specifics.)
STF	Staff engineer assigned to a specific area within an operating facility, or facilities or within the corporate structure. (Detail specifics.)
SUP	Supervisor of operating facility, of an operating crew on day or rotating shifts. (Detail area of responsibility, number and type of subordinates.
TEC	Laboratory or plant technician generally working under direct supervision and carrying out routine analyses, quality control examinations or equipment tests. (Detail specifics.)
TRA	Training or apprentice type activities.

OTH Other activities unrelated to Engineering

Column (c): Fill in the beginning date in the format "month/year" for each engagement number. This should not overlap or be the same as any other ending date.

Column (d): Fill in the ending date in the format "month/year" for each engagement number. This should not overlap next beginning date.

Column (e): Using the beginning and ending dates for each engagement number, compute the elapsed time in years (to the nearest tenth of a year) and enter that amount in this column. Use the same format for elapsed time for columns (f) through (j) as well.

Column (f): For each engagement number, determine what portion of (e) is attributable to engineering experience obtained while training for a position or prior to being put in a responsible charge at that position. This column should include time for each change of position for an employer, even if it follows a period when you were in responsible charge for a previous position. Do not assume that because you achieved a responsible charge position for one duty, that from that time forward all of your time will be considered by the Board to be in responsible charge.

Column (g): For each engagement number, determine what portion of (e) is attributable to engineering experience in responsible charge and enter that amount in this column. Responsible charge experience should be limited to only those activities considered "professional level" in nature. Specifically, this would include those periods when you were acting in a supervisory/managerial capacity of engineering personnel/projects responsible for the quality, review and evaluation of the information gathered or for the presentation/representation of engineering matters to clients, their agents, municipal Boards, and state agencies.

Column (h): For each engagement number, determine what portion of (e) is attributable to experience while holding a valid registration to practice engineering in another state or jurisdiction and enter that amount in this column.

Column (i): For each engagement number, determine what portion of (e) is attributable to engineering experience. This number should equal the total of columns (f) through (h). Experience that does not comply with the definition of engineering as defined by the registration law, MGL C112, §81D, should be listed column (j). Entries in column (i) must be exclusive of any other time claimed for the same period for any other professional disciplines reflected on any other application for registration/licensure. Therefore, if an engagement period claims experience while working for a multidisciplinary firm, (i.e. engineering for instance) the total claimed experience for both can not exceed the total elapsed time in column (e).

Column (j): Enter the time in this column associated with academic engagements as noted in section 24 or any employment experience that that does not comply with the definition of land surveying as defined by the registration law, MGL C112, §81D

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Column (k): For each engagement number, provide the name of the supervising Engineer who was in "responsible charge" of your engineering work for that time period. Include that supervisor's license number, jurisdiction, current daytime telephone number and employer at the time of that engagement number. Note: "independent contractors" and "employees" are hired on a very different contractual basis and hence have very different "direct charge" and supervisory roles with regard to the employees of the contracting firm that is actually providing the client service. For the Board to properly evaluate experience under MGL c 112, you must never designate the employer of an "independent contractor" or "sub-contractor" as being the contracting firm. If the supervisor for an engagement period is deceased, so indicate and provide the name of another senior member of the firm (preferably an engineer) who can verify your employment experience.

Column (l): Provide the name, address, and telephone number of the place where you were employed for each engagement. The word "same" can be entered if there was no change from the previous (listed above) employer. If the firm has dissolved or if it is now operating under a different name, such details must be provided. If the firm has dissolved, provide the name of a reference (preferably a professional engineer) that can verify the employment experience for that period. If you were self-employed, you must provide the name of an associate or client, preferably a registered Professional Engineer, to verify your employment status for that period.

APPLICATION GLOSSARY

ACADEMIC COURSES: An institution or scholarly establishment of higher learning offering accredited courses or formal education.

ACADEMIC DEGREE: title granted by a college or university, usually signifying completion of an established course of study.

ADDENDUM: When there is insufficient space provided for required information, an addendum should be attached and a reference to it supplied in the space for the applicant's response. Addendum's should be 8.5 by 11 inch sheets entitled "Attachment #___" on the top center of the sheet. Use one sheet for each attachment.

APPLICANT: The person making this application and attesting to the truthfulness of the statements and facts contained herein.

APPROVED COURSES: Engineering courses approved by the Board or comprising one of the core subjects for an academic curriculum in engineering.

BOARD: The Commonwealth of Massachusetts Board of Registration of Professional Engineers and Professional Land Surveyors.

CLIENT: A person for whom the practitioner is performing services. A client may be a property owner, contractor, developer, etc.

COMITY: In the context used by the Board, is the principle by which one jurisdiction may accede or give effect to the laws or judgments of another Board. Massachusetts grants comity consideration only if the Board can determine that licensee's primary jurisdiction licensed the applicant in compliance with Massachusetts requirements.

DIRECT SUPERVISION: The acts of a duly licensed person for a specified professional discipline who either personally prepares or was in responsible charge over the preparation of work products and has a verifiable record that the individuals preparing such work products were subject to regular and continuing review and supervision during and throughout the development of such products.

DISCIPLINES: In the context of professional practice, the Board considers disciplines as those branches of engineering regulated by Massachusetts law which require special training and knowledge.

EMPLOYER: To gainfully engage the services of personnel as defined by federal and state tax laws.

ENGAGEMENT: Employment periods demonstrating experience or education at a given discipline.

ENGINEER: An engineer is a professionally qualified individual, who follows as a calling, any of the several branches of engineering.

ENGINEERING: Engineering is the art and science by which the properties of matter and the sources of power in nature are made useful to man in machines, structures and manufactured products.

EXPERIENCE CLASSIFICATION: The amount of a specified type of experience required for registration by the Board. Usually associated with or linked to a specific type of educational background.

FIRM: A corporation, sole-proprietorship, proprietor trust, P.A., LLP, LLC, company or co-partnership which offers, or uses, professional engineering services (as defined by Massachusetts General Laws) by letterhead or professional listing and for whom others may be employed in that service.

JURISDICTION: A state, territory or legislative body with the authority to regulate the practice of Engineering as discrete and separate from other professional endeavors.

INTERVIEW: Per MGL an interview is part of the examination process. (see Oral Exam)

LICENSE: A determination by a governing jurisdiction that a person has completed the required courses of study and acquired the necessary experience thorough a process of application and examination following which the person is registered to practice professionally in that jurisdiction.

MGL: Massachusetts General Laws

MULTIDISCIPLINARY: A person, firm or co-partnership, etc. having or employing more than one professional discipline.

PE REINSTATEMENT APPLICATION INSTRUCTIONS

NCEES: The National Council of Examiners for Engineering and Surveying. The organization that prepares the Fundamentals examinations and the Principles and Practices examinations for registration as an engineer.

NON-RESIDENT: Any person who resides outside the Commonwealth of Massachusetts, whether or not their employment is within the Commonwealth.

ORAL EXAMINATION: A formal interview of a person, arranged by the Board, to assess the qualifications of an applicant prior to admittance to written examinations or registration as a Professional Engineer.

ORGANIZATION: In the context of this form, means any establishment, society, or concern established for the benefit of the engineering profession's practitioners, and concerned with issues such as professional ethics, continuing education, public awareness, practice interchange, etc.

PRACTICE: see professional practice.

PRIMARY JURISDICTION: The jurisdiction where a professionally licensed person was first licensed/registered to practice Engineering.

PROFESSIONAL PRACTICE: Services offered by licensed members of a profession as defined by law, regulation, or the normal practice of other competent, similarly situated professional engineers of good repute.

RECIPROCITY: The Board interprets reciprocity to mean the mutual or cooperative exchange of favors and privileges, especially the exchange of rights or privileges of licensing between jurisdictions. Massachusetts does not grant licenses based upon this premise. (see comity)

REGISTRATION: The process by which the Board first determines that an applicant is qualified to practice and secondly makes a formal record of such determination, by virtue of assigning each practitioner a unique license or registration number, issuing the practitioner a certificate of such and making a record of such determination.

RESPONSIBLE CHARGE: Responsible charge signifies both the control and the obligation in the performance of professional services that meet or exceed professional standards of practice. In the context of the Professional Engineering application, this requirement refers to those activities of the unregistered practitioner that are at the "professional level" in nature, performed under the direct supervision of a Professional Engineer, and that would indicate to the Board that the applicant is capable of providing such services to a consumer or the public upon becoming registered/licensed. An indicator of responsible charge experience is when an applicant for registration supervises, manages or administers engineering personnel and/or projects. In this context, the applicant is responsible for the quality, review and evaluation of engineering matters or their presentation to clients, their agents, municipal boards and other such agencies or persons. For such experience to meet the statutory requirement for registration, it must be

comprised of a varied and diverse mix of these activities.

SUPERVISOR: In this context, refers to someone with direct supervision responsibility for another's work. (see direct supervision)

WORK PRODUCT: Work products are tangible items created or identified by the practitioner that communicate information to the client or members of the public regarding the practitioner's opinion or the services performed.

WRITTEN EXAMINATION: Are comprised of two examinations prepared by NCEES for the individual state Boards. The first is the eight hour Fundamentals of Engineering examination (FE) and the second is the Principles and Practices of Engineering exam (PE).

Commonwealth of Massachusetts

Division of Occupational Licensure

Board of Registration of Professional Engineers and Professional Land Surveyors

Professional Engineering Reinstatement Application

1. Applicant Name: _____
(last) (first) (middle)

2. Other Name: _____
(last) (first) (middle)

3. Residential Address: _____
(number) (street) (apt. #)

(post office box)

(city/town) (state) (zip code)

(email address)

4. Business Address: _____
(current employer) (company name)

(post office box) (or number, street, suite #)

(city/town) (state) (zip code)

(email address)

ADMIN. USE ONLY

Appl.# _____

License# _____

Type: _____

Cash: _____

Cash Date: _____

Action: _____

Date: _____

Attach a recent
passport 2" X 2" type
photograph of yourself

5. Address for correspondence: ☐ Residential ☐ P.O. Box ☐ Business

6. Date of Birth: _____ 7. Place of Birth: _____

8. Citizenship: ☐ United States ☐ Other (specify) _____

9. Telephone Numbers (with area code): Day: _____ Evening: _____

PE Reinstatement Application

10. Do you currently or have you ever held a licenses/registrations to practice Land Surveying or Engineering in the United States or in a foreign jurisdiction other than Massachusetts? If yes, then complete the top section of "Attachment A" indicating the status of all license/certification ever held and any relevant disciplinary information. ☐ Yes
☐ No
11. If you were practicing engineering during the period of lapsed license, was that practice unlawful (did you continue to provide professional services or continue to sign and seal plans, documents, specifications)? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information" ☐ Yes
☐ No
12. Has a licensing/registration Board located in the United States or any country or foreign jurisdiction taken any disciplinary action against you? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information." ☐ Yes
☐ No
13. Are you the subject of pending disciplinary actions by a licensing/registration Board located in the United States or any country or foreign jurisdiction? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information" ☐ Yes
☐ No
14. Have you ever voluntarily surrendered or resigned a professional license/registration to a licensing/registration Board in the United States or any country or foreign jurisdiction? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information." ☐ Yes
☐ No
15. Have you ever applied for and been denied a professional license/registration in the United States or any country or foreign jurisdiction? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information") ☐ Yes
☐ No
16. Have you ever been convicted of a felony or misdemeanor in the United States or any country or foreign jurisdiction, other than a traffic violation for which a fine of less than \$300.00 was assessed? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information" ☐ Yes
☐ No
- NOTE: The Board is certified by the Criminal History Systems Board [ID# MAREG G] to access data about convictions and pending criminal cases. Those records and other Federal and professional records may be checked as part of your licensing process. No records are automatic disqualifiers; you will be given an opportunity to discuss any issues with the Board.
17. Did you obtain any of your education or professional experience under a different name? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information" ☐ Yes
☐ No
18. Are you currently employed in a profession other than Engineering or a in position that does not involve the practice of engineering? If yes, then provide the specifics in the correspondingly numbered table entry entitled "Attachment A – General Information" ☐ Yes
☐ No
19. Have you previously taken an NCEES sanctioned Fundamentals of Engineering examination? ☐ Yes ☐ No

Jurisdiction	Date of exam	Exam Score: <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Disqualified
Jurisdiction	Date of exam	Exam Score: <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Disqualified
Jurisdiction	Date of exam	Exam Score: <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Disqualified

PE Reinstatement Application

20. Have you previously taken an NCEES sanctioned Principles & Practices of Engineering examination? ☐ Yes ☐ No

Jurisdiction	Most recent date:	Times taken	Exam Hours:	Discipline/Branch	Exam Score: <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Disqualified
Jurisdiction	Most recent date:	Times taken	Exam Hours:	Discipline/Branch	Exam Score: <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Disqualified
Jurisdiction	Most recent date:	Times taken	Exam Hours:	Discipline/Branch	Exam Score: <input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> Disqualified

21. List your membership/affiliations in professional engineering organizations or societies:

NAME	GRADE OF MEMBERSHIP	MEMBER SINCE	OFFICES HELD

22. List schools & colleges attended (*see instructions*)

INSTITUTION	CITY, STATE	YEARS ATTENDED	CURRICULUM	DEGREE/CREDITS
High School:				N/A
Preparatory School:				N/A
College/University:				
College/University:				
College/University:				

(list only accredited academic courses of study)

23. List your most recent non-degree or non-academic courses of study (*workshops, seminars, etc.*):

COURSE TITLE	OFFERED BY	DATES	CEU's/PDH's

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24. Experience Table *(read instruction carefully before completing this section)*

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)
Engagement Number	EXPERIENCE CATEGORY (see instructions for designations)	BEGINNING DATE (month/year)	ENDING DATE (month/year)	ELAPSED TIME (decimal years to nearest tenth year)						SUPERVISING ENGINEER (include license # & Jurisdiction, current daytime telephone # and their employer for that period)	YOUR EMPLOYER (company name, address and telephone number)
				ELAPSED TIME (for this engagement)	PRE-RESPONSIBLE CHARGE (Engineering Experience)	RESPONSIBLE CHARGE (Engineering Experience)	Professional (Engineering Experience)	TOTAL ENGINEERING (columns f, g, h)	OTHER (non-engineering & academic)		
Earliest date of registration in Massachusetts for license being reinstated: (do not show entries in table prior to this date)											
1											
2											
3											
4											
5											
6											
Totals: <i>(column e thorough j)</i>											

PE Reinstatement Application

AFFIDAVIT & NOTARIZATION

"The undersigned applicant acknowledges that the Commonwealth of Massachusetts Board of Registration of Professional Engineers and Professional Land Surveyors (Board), by its usual standards and procedures, will examine and compile a record with respect to all aspects of the applicant's engineering career. The applicant agrees to provide any additional information in connection with the inquiry as may be required by the Board."

"The applicant certifies that the information contained herein truthfully and accurately reflects the applicant's employment and educational background and that the supplemental materials provided are examples of work prepared exclusively by the applicant except as specifically noted thereon. The applicant authorizes the Board to make such investigations and inquiries as may be necessary to substantiate the statements supplied herein. This may include contacting the employers, references and supervisors named herein. Applicant understands that any address or telephone number found to be invalid at the time of the application will automatically invalidate that portion of the submission and may result in a rejection of the application."

"I certify, under the pains and penalties of perjury, that the information I have provided pursuant to this application for licensure is truthful and accurate. I understand that the failure to provide accurate information may be grounds for the Board to deny the application or to suspend or revoke a license issued to me, if said license is issued based upon fraudulently supplied information. I further attest that, pursuant to MGL C62, §49A, to the best of my knowledge and belief, I have filed all state tax returns and paid all state taxes required by law."

"I further certify that I have read and understand the applicable laws, rules and regulations of the Commonwealth of Massachusetts (MGL c112, s81D – 81T and 250 CMR) and the instructions that accompany this application."

(signature of applicant)

(date)

NOTARY

Jurisdiction of: _____ County of: _____ SS: _____

I, _____, a Notary Public in and for said county, in the jurisdiction aforesaid, DO

HEREBY CERTIFY that _____ personally known to me to be the same person

whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged

that he/she signed, sealed and delivered the said instrument as his/her free and voluntary act, for the uses and

purposes therein set forth.

Given under my hand and notarial seal this _____ day of _____, 20____

(Notary Public Signature)

(my commission expires)

Notarial Seal

PROFESSIONAL ENGINEERING REINSTATEMENT ATTACHMENT A

Section 10 Response: Provide information for other engineering and land surveying licenses/certifications (see instructions for required "Request for Verification"; provide supplemental sheets if necessary)

JURISDICTION	BRANCH	DATE ISSUED	NUMBER	STATUS *	DISCIPLINARY ACTION
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

(*status: current, inactive, suspended, probation, etc.)

If your answer was yes for any of the questions in sections 11 thorough 18 then you must provide an explanation in the corresponding box below.

Section 11 Response
Section 12 Response
Section 13 Response
Section 14 Response
Section 15
Section 16 Response
Section 17 Response (refer to engagement number in experience table that this response applies to)
Section 18 Response (refer to engagement number in experience table that this response applies to)

DFC: 9GG=CB5@9B; =B99F =B; 'F 9=BGH5H9A 9BH'

9LD9F =9B79'9B; 5; 9A 9BH'7CJ 9FG<99H'

fl =@@CI H'CB9'7CDMC: 'H<=G'G<99H': CF'957<'C: 'G97H=CB'&('G'9B; 5; 9A 9BHG'5B8'5HH57<'=H'HC'H<9'5GGC7=5H98'F9: 9F 9B79'A 5H9F =5@Gk'

ENGAGEMENT NUMBER:	ENGAGEMENT CATEGORY: <i>(3 letter acronym)</i>
TYPICAL DUTIES ASSOCIATED WITH THIS ENGAGEMENT:	
SCOPE OF EXPERIENCE ASSOCIATED WITH THIS ENGAGEMENT:	
LEVEL OF RESPONSIBILITY ASSOCIATED WITH THIS ENGAGEMENT:	
TYPES OF ATTACHED DOCUMENTATION:	
PROFILE OF MULTIDISCIPLINARY FIRM'S SERVICES (IF APPLICABLE):	
PROFILE OF FIRM'S TYPICAL ENGINEERING SERVICES:	

Commonwealth of Massachusetts

Division of Occupational Licensure

The Board of Registration of Professional Engineers and Professional Land Surveyors

Request for Verification

For Non-Massachusetts License, Registration, Examination, Standing

Applicant requesting status of registration/license/examination: (to be filled out by applicant)

Name:		Type of License/Registration:
Street Address:		License/Registration #:
Other:		Last four digits of SS#:
City:		Date of Birth:
State:	Zip:	

Status of applicant's Certificate/Registration/License: (to be filled out by jurisdiction)

Record	Certif. No.	Date Issued	Valid Until	Disciplinary Actions
Engineer In Training EIT				<input type="checkbox"/> Yes <input type="checkbox"/> No
Professional Engineer PE				<input type="checkbox"/> Yes <input type="checkbox"/> No
Surveyor in Training SIT				<input type="checkbox"/> Yes <input type="checkbox"/> No
Professional Land Surveyor PLS				<input type="checkbox"/> Yes <input type="checkbox"/> No
Other: _____				<input type="checkbox"/> Yes <input type="checkbox"/> No

Disciplinary Actions: _____

Applicant's examination record: (to be filled out by jurisdiction)

Exam	Hours	Result	Date	NCEES Exam	Branch
FE		<input type="checkbox"/> Pass <input type="checkbox"/> Fail		<input type="checkbox"/> Yes <input type="checkbox"/> No	
P&PE		<input type="checkbox"/> Pass <input type="checkbox"/> Fail		<input type="checkbox"/> Yes <input type="checkbox"/> No	
FLS		<input type="checkbox"/> Pass <input type="checkbox"/> Fail		<input type="checkbox"/> Yes <input type="checkbox"/> No	n/a
P&PLS		<input type="checkbox"/> Pass <input type="checkbox"/> Fail		<input type="checkbox"/> Yes <input type="checkbox"/> No	n/a
Oral		<input type="checkbox"/> Pass <input type="checkbox"/> Fail		By Board	
Other: _____		<input type="checkbox"/> Pass <input type="checkbox"/> Fail		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Remarks: _____

Processing agency's Instructions:

Return completed form to: DPL, Board of Engineers and Land Surveyors 1000 Washington Street, Suite 710 Boston, MA 02118	Attested By:	Board Seal:
	Signature:	
	Title:	
	Date:	

COMMONWEALTH OF MASSACHUSETTS
1 Federal Street, Suite 0600
Boston, MA 02110-2012

CRIMINAL OFFENDER RECORD INFORMATION (CORI)
ACKNOWLEDGEMENT FORM

The Division of Occupational Licensure by itself and on behalf of boards of registration pursuant to M.G.L. c. 13, §9 [hereinafter, "Division of Occupational Licensure"] is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective license applicants and current licensees.

As a license applicant or current licensee, I understand that a CORI check will be submitted for my personal information to the Department of Criminal Justice Information Services ("DCJIS"). I hereby acknowledge and provide permission to the Division of Occupational Licensure to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the Division of Occupational Licensure written notice of my intent to withdraw consent to a CORI check.

FOR LICENSING PURPOSES ONLY:

I understand that the Division of Occupational Licensure may conduct a subsequent CORI check within one year of the date this Form was signed by me.

By signing below, I provide my consent to an initial CORI check and a subsequent CORI check, both within one year of the date of this Form, and acknowledge that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

Signature

Date

Please provide the name of the board of registration and license type for which you are applying or currently hold:

Board of Registration

License Type

NOTE: DOL CANNOT ACCEPT THIS TWO-PAGE CORI ACKNOWLEDGMENT FORM UNLESS IT IS EITHER (1) SIGNED IN PERSON AT THE BOARD'S OFFICES IN THE PRESENCE OF A DOL EMPLOYEE WHO HAS VERIFIED THE APPLICANT'S IDENTITY THROUGH ACCEPTABLE IDENTIFICATION, OR (2) SIGNED IN THE PRESENCE OF A NOTARY PUBLIC WHO HAS LIKEWISE VERIFIED IDENTITY AND THEN MAILED OR OTHERWISE DELIVERED TO THE BOARD'S OFFICES AT THE ADDRESS SET FORTH ABOVE.

SUBJECT INFORMATION: (A red asterisk (*) denotes a required field)

*Last Name *First Name Middle Name Suffix

*Maiden Name (or other name(s) by which you have been known)

*Date of Birth Place of Birth

* Social Security Number: _____ - _____ - _____

Sex: _____ Height: _____ ft. _____ in. Eye Color: _____

Driver's License or ID Number: _____ State of Issue: _____

Current and Former Addresses:

Street Number & Name City/Town State Zip

Street Number & Name City/Town State Zip

IDENTITY VERIFICATION SECTION: If this form is submitted by hand at DOL Offices, Section A must be completed. Otherwise, Section B must be completed.

SECTION A: VERIFICATION BY DOL EMPLOYEE: I hereby certify that I verified the identity of the above-referenced subject by reviewing the following form(s) of government-issued identification:¹

☐ Passport ☐ State-issued driver's license ☐ Military identification ☐ State-issued identification card

VERIFIED BY: _____
Name of Verifying DOL Employee (Please Print)

Signature of Verifying DOL Employee Date

SECTION B: VERIFICATION BY NOTARY:

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____ (name of document signer), and proved to me through satisfactory evidence of identification, which was the following:¹

☐ Passport ☐ State-issued driver's license ☐ Military identification ☐ State-issued identification card

to be the person whose name is signed on the preceding or attached document, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

Notary Public: _____ Notary Commission Expires On _____

¹ If a subject does not have an acceptable government-issued identification, his or her identity shall be verified by other forms of documentation as determined by DCJIS. 803 CMR 2.09(2).