

Professional Engineer

APPLICANT INFORMATION

Full Legal Name: _____
First Middle Last

All Previous Legal Names: _____

Other DOPL Licenses Held: _____

SSN: _____ Date of Birth: _____ Gender: Male Female

Address: _____
Street Address (including Apt/Unit/Ste #) and/or PO Box

City State ZIP Code

Phone: _____ Email: _____

Please Select ONE:

- I am a United States citizen OR a non-citizen of the United States who is lawfully present.
- I am a foreign national not physically present in the United States.
- None of the above, please explain: _____

Driver License

or State ID Card: _____
State of Issue License/ID Number Expiration Date

NOTE: If you do not hold a US Driver License or a US State ID, you must present a legible copy of your current and valid government issued document(s) showing evidence of lawful presence in the United States.

AFFIDAVIT AND RELEASE

1. I certify that I am qualified in all respects for the license for which I am applying in this application.
2. I certify that to the best of my knowledge, the information contained in the application and all supporting document(s) are true and correct, discloses all material facts regarding the applicant, and that I will update or correct the application as necessary, prior to any action on my application.
3. I authorize all persons, organizations, governmental agencies, or any others not specifically listed, which are set forth directly or by reference in this application, to release to the Division of Occupational and Professional Licensing, State of Utah, any files, records, or information of any type reasonably required for the Division to properly evaluate my qualifications for licensure/certification/registration by the State of Utah.
4. I understand that it is the continuing responsibility of applicants and licensees to read, understand, and apply the requirements contained in all statutes and rules pertaining to the occupation or profession for which I am applying, and that failure to do so may result in civil, administrative, or criminal sanctions.
5. I certify that I do not currently pose a direct threat to myself, to my clients, or to the public health, safety or welfare because of any circumstance or condition.
6. I understand that I am responsible to update the Division of any changes relating to my license/certification/registration.

Signature of Applicant: _____ Date: _____

QUALIFYING QUESTIONNAIRE

Do not leave any question blank.

DOPL may request additional documentation if the information submitted is insufficient.

1. Yes No Have you EVER had a license, certificate, permit, or registration to practice a regulated profession denied, conditioned, curtailed, limited, restricted, suspended, revoked, reprimanded, resigned, or surrendered while under investigation, or otherwise **disciplined in any way**?
2. Yes No Do you CURRENTLY have **any criminal action active or pending**?
3. Yes No WITHIN THE PAST 10 YEARS, have you pled **guilty** to, **no contest** to, entered into a **plea in abeyance**, or been **convicted of a misdemeanor** in any jurisdiction?
4. Yes No Have you EVER pled **guilty** to, **no contest** to, entered into a **plea in abeyance**, or been **convicted of a felony** in any jurisdiction?

If you answered "yes" to question 1 above, please provide a copy of the disciplinary action. If you answered "yes" to questions 2, 3, or 4, please provide a current criminal history report from each and every state where criminal history has occurred.

NOTE:

- **DISCLOSE** charges that were later held in abeyance, diverted, reduced, or dismissed.
- **DISCLOSE** motor vehicle offenses such as driving while impaired or intoxicated. But you do not need to disclose minor traffic offenses such as parking or speeding violations.
- You do **not need to disclose** juvenile offenses, unless you were tried as an adult.
- **DISCLOSE** if you are restricted from possession, purchase, transfer, or ownership of a firearm or ammunition (even if your restriction is based on a non-reportable juvenile conviction).
- You do **not need to disclose** legally expunged or sealed criminal history incidents.

For more information, see DOPL's [criminal history FAQs](#).

PROFESSIONAL LICENSES

List all other licenses, registrations or certifications issued by any state which you now hold or have ever held in any profession. (Use additional sheets if necessary.)

Profession: _____ License Number: _____

Issuing State: _____ License Status: _____ Issue Date: _____

Profession: _____ License Number: _____

Issuing State: _____ License Status: _____ Issue Date: _____

EDUCATION REQUIREMENTS

Select one:

- I have a current NCEES Council Record. *Date Requested:* _____
- I have been licensed in good standing for at least one year a [jurisdiction deemed equivalent](#) for licensure by endorsement. See "Applicants by Endorsement" on the checklist at the end of this application.
- I do not have a NCEES Council Record or a license that qualifies for licensure by endorsement; however, I have:
- completed an engineering education program accredited by EAC/ABET or CEAB;
 - completed an engineering education program in a foreign country; or
 - been licensed as an engineer and practiced as a principal for 5 of the last 7 years in another state in lieu of having met the education requirements for licensure.

See "applicants without an NCEES Council Record" on the checklist at the end of this application.

Verification of Engineering Experience

Initial applicants who have not practiced as a principal for at least 5 of the last 7 years, must use this form to document experience.
If you are applying with an NCEES Council Record you do not need to complete this form.

APPLICANT INFORMATION

To Be Completed By The Applicant:

Full Legal Name: _____
First Middle Last

Mailing Address: _____
Street/PO Box City State/Zip

License Number (if applicable) : _____ State of Issue: _____

Dates of Employment: _____ to _____ Firm Name: _____
MM/DD/YYYY MM/DD/YYYY

Approximate Number of Hours Worked Per Week: _____ Total Hours Worked: _____

I certify that during the dates and hours listed above I completed the required qualifying experience as outlined in 58-22-302 and R156-22-302e specific to the license for which I am applying.

Signature of Applicant: _____ Date: _____

EMPLOYER INFORMATION

To Be Completed By The Supervising Engineer or Other Qualified Licensee:

Please review the information above, complete the sections below, sign and seal the document and submit directly to b5@utah.gov

Is the information provided above by the applicant correct? Yes No, please attach an explanation.

Name of Supervisor: _____

Title: _____ Date: _____

Phone: _____ Email: _____

License Number: _____

State of Issue: _____

(Seal and Signature)

Verification of Engineering Experience as a Principal

Use this form to verify licensed practice as a principal engineer for 5 of the last 7 years in another state in lieu of having met the education requirements for licensure. If you are applying with an NCEES Council Record you do not need to complete this form.

"Principal" means a licensed professional engineer having responsible charge of an organization's professional engineering practice.

APPLICANT INFORMATION

To Be Completed By The Applicant:

Full Legal Name: _____
First Middle Last

Mailing Address: _____
Street/PO Box City State Zip

License Number (if applicable): _____ State of Issue: _____

Dates of Employment as a Principal: _____ to _____ Firm Name: _____
MM/DD/YYYY MM/DD/YYYY

Approximate Number of Hours Worked Per Week: _____ Total Hours Worked: _____

I certify that during the dates and hours listed above I practiced within the legal scope of a licensed engineer and acted as a principal.

Signature of Applicant: _____ Date: _____

EMPLOYER INFORMATION

To Be Completed By The Supervising Engineer or Other Qualified Licensee:

Please review the information above, complete the sections below, sign and seal the document and submit directly to b5@utah.gov

Is the information provided above by the applicant correct? Yes No, please attach an explanation.

Name: _____

Title: _____ Date: _____

Phone: _____ Email: _____

License Number: _____

State of Issue: _____

(Seal and Signature)

APPLICATION CHECKLIST AND INSTRUCTION

This checklist is for your convenience; you do not need to include it with your application.

NOTE: Incomplete applications will be denied.

Your application is classified as a public record and may be available for inspection by the public, except with regard to the release of information which is sub-classified as controlled, private, or protected under the Government Records Access and Management Act or restricted by other law.

ALL APPLICANTS

All applicants are required to submit following items to complete the application:

- \$121.00 non-refundable application-processing fee, made payable to "DOPL".
- Supporting documentation for any "yes" answers provided on the "Qualifying Questionnaire".

APPLICANTS WITH A CURRENT NCEES COUNCIL RECORD

If you are applying with a **current NCEES Council Record**, *in addition* to the items required for all applicants, you must:

- Request that NCEES submit your current Council Record to Utah. To obtain an NCEES Council Record, contact NCEES at 1-864-654-6824, 1-800-250-3196, or www.ncees.org.

APPLICANTS BY ENDORSEMENT

If you have been licensed for at least one year, and are in good standing in a [jurisdiction designated as equivalent](#) to Utah, *in addition to the items required for all applicants*, you must submit official verification of your license.

Please see [our website](#) for additional information regarding approved jurisdictions, and if additional documentation is required for your state or circumstances

APPLICANTS WITHOUT AN NCEES COUNCIL RECORD

If you are applying for a Utah license **without a council record and do not qualify for licensure by endorsement**, *in addition* to the items required for all applicants, you must provide:

- Verification of meeting licensure education requirements through one of the methods below:
 - Official transcripts documenting completion of an EAC/ABET accredited program. Transcripts are considered official when mailed directly to DOPL from the school or when delivered in a sealed envelope with the school's stamp/seal on the envelope flap. Transcripts may also be sent via secure email from the school's registrar office to b5@utah.gov.
 - NCEES Credential Evaluation: If your engineering education program was completed in a foreign country, contact NCEES Credentials Evaluations at www.ncees.org or 1-800-464-7650. Please have NCEES send your evaluation directly to DOPL.
 - Verification of Engineering Experience as a Principal. Licensed Practice as a Principal: If you have been licensed as an engineer and practiced as a principal for 5 of the last 7 years in another state, submit the "Verification of Engineering Experience as a Principal" form. You must also have the state(s) you are verifying principal experience from submit verification of your license to Utah.
- Verification of passing the NCEES FE and PE. If you passed the NCEES FE and/or the NCEES PE exam in another state, you must request an official verification of your scores and license (if applicable) to be sent directly to Utah. If you tested in Utah, we will be able to access your scores directly from NCEES.
- One of the items below:
 - Verification of licensure in another state verifying licensure for the time documented on your Verification of Experience as a Principal.
 - Verification of Experience form documenting one of the pathways listed below. All employers must complete a separate form. If your experience was obtained as a licensed engineer in another state, you must submit verification of your licensure from that state.
 - 4 years of supervised work experience if you hold an EAC/ABET accredited bachelor's degree;
 - 3 years if you hold an EAC/ABET accredited master's degree and your undergraduate degree was earned in an EAC/ABET accredited program;
 - 2 years if you hold a doctorate degree in engineering and your undergraduate degrees were earned in an EAC/ABET accredited program.

APPLICANTS REINSTATING AN EXPIRED UTAH LICENSE

If you were previously licensed in Utah, and your license has been expired for more than 2 years, *in addition* to the items required for all applicants, you must provide:

- All of the requirements for one of the pathways to licensure listed above. Some information, such as exam and education, may be on file with DOPL. Please call to verify before omitting an item.
- Documentation of completing 30 hours of continuing education in the two years immediately preceding submitting this application.

Submit the above items with your completed application to:

In Person or Via Express Delivery:

Division of Occupational and Professional Licensing
Heber M Wells Building, 1st Floor Lobby
160 E 300 S
Salt Lake City, UT 84111

US Postal Service:

Division of Occupational and Professional Licensing
PO BOX 146741
Salt Lake City, UT 84114-6741

If you have questions, please contact the Division via our direct email address, b5@utah.gov, or via the phone or fax listed below. Do not send applications or payment to this email.