Professional Structural Engineer

		APPLICANT INFORMATI	ON			
Full	Legal Name:					
	First	Middle	Last			
All	Previous Legal Names:					
Oth	er DOPL Licenses Held:					
SSN	:	Date of Birth:	Gender: Male Female			
Add	ress: Street Address (including Ap	ot/Unit/Ste #) and/or PO Box				
	City	State	ZIP Code			
Pho	ne:	Email:				
or S	None of the above, please Ver License State ID Card: State of Issue TE: If you do not hold a US Driv	ver License or a US State ID, you must	Expiration Date present a legible copy of your current and valid			
gove	ernment issued document(s) s	howing evidence of lawful presence in t AFFIDAVIT AND RELEA				
1.	Lender that Lam qualified in a					
2.	certify that I am qualified in all respects for the license for which I am applying in this application. certify that to the best of my knowledge, the information contained in the application and all supporting locument(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.					
	nuthorize all persons, organizations, governmental agencies, or any others not specifically listed, which are set rth directly or by reference in this application, to release to the Division of Occupational and Professional censing, State of Utah, any files, records, or information of any type reasonably required for the Division to operly evaluate my qualifications for licensure/certification/registration by the State of Utah.					
	requirements contained in all s	nderstand that it is the continuing responsibility of applicants and licensees to read, understand, and apply the uirements contained in all statutes and rules pertaining to the occupation or profession for which I am applying, I that failure to do so may result in civil, administrative, or criminal sanctions.				
		tify that I do not currently pose a direct threat to myself, to my clients, or to the public health, safety or welfare ause of any circumstance or condition.				
	I understand that I am respons license/certification/registration	sible to update the Division of any chan n.	ges relating to my			
Sign	ature of Applicant:		Date:			

QUALIFYING QUESTIONNAIRE Do not leave any question blank. DOPL may request additional documentation if the information submitted is insufficient. 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? **4.** The sign is the square of 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 abevance, 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** <u>legally</u> 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: _____ Issue Date: Profession: License Number: _____ Issuing State: License Status: Issue Date:

EDUCATION AND EXAM REQUIREMENTS

Select one:

☐ I have a current NCEES Council Record. Date Requested: ______
 ☐ I have completed an engineering education program accredited by EAC/ABET or CEAB. Submit official transcripts.

Thave completed an engineering education program accredited by EAG/ABET of CEAB. Submit official transcripts

☐ I have completed an engineering education program in a foreign country. Submit NCEES Credential Evaluation.

☐ I have 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. Submit "Verification of Structural Engineering Experience as a Principal" found in this application.

If you did not select NCEES Council Record above, and you passed the NCEES FE and/or the NCEES SE examinations in another state, <u>you must request an official verification of your scores and license</u> (if applicable) be sent directly to Utah. If you tested in Utah, we will be able to access your scores directly from NCEES.

Verification of Structural Engineering Experience

Initial applicants who have not practiced as a principal for at least 5 of the last 7 years, or do not qualify for licensure by endorsement, must use this form to document experience.

If you are applying with an NCEES Council Record you do not need to complete this form. A DDL IO ANT INCODMATION

	AP	PLICANT INFORMA	ATION	
To Be Completed By	The Applicant:			
Full Legal Name:				
Fi	irst	Middle	Last	
Mailing Address:				
	Street/PO Box	City		State/Zip
License Number:			State of Issue:	
Dates of Employmer	nt:	to	Firm Name:	
	MM/DD/YYYY	to	_	
Approximate Number	er of Hours Worked Per	Week:	Total Hours Worked:	
	Experience is required	in <u>each</u> of the following	j areas:	Completed Hours
	owing four materials as the steel, concrete, wood; or		ehabilitation or investigation of	
Selection of framing sy	ystems including the consi	ideration of alternatives a		
	r the interaction of structur n systems including the co		rt vertical and lateral loads. es and the selection of an	
	undation systems to suppo			
			ories buildings or structures.	
requirements.			n addition to any wind design	
Applications of the loc and detailing.	al, state and federal code	requirements as they rela	ate to design loads, materials,	
Ex	perience is required in <u>o</u>			
			feet in height, located in a rent codes adopted pursuant to	
Structural design for a a region of moderate of		abilitation of an existing b	ouilding or structure located in	
Structural design of ar	ny other structure of compa	arable structural complex	kity.	
	dates and hours listed a f specific to the license fo		equired qualifying experience a	as outlined in 58-22-
Signature of Applica	nt:		Date:	
		IPLOYER INFORMA	TION	
Please review the info <u>b5@utah.gov</u> .	The Supervising Struct rmation above, complete	tural Engineer: the sections below, sig	n and seal the document and	submit directly to
Is the information provide	ded above by the applican	t correct? Yes No	o, please attach an explanation.	
Name of Supervisor	:			
Title:		Date:		
Phone:		Email: _		
License Number: _				
State of Issue:			(Seal and Signature))

Verification of Structural Engineering Experience as a Principal

Use this form to verify licensed practice as a principal structural engineer for 5 of the last 7 years in another state <u>in lieu</u> of having met the education or endorsement requirements for licensure. If you have an NCEES Council Record you do not need to complete this form. "Principal" means a licensed professional structural engineer having responsible charge of an organization's professional structural engineering practice.

APPLICANT INFORMATION					
To Be Completed By	y The Applicant:				
Full Legal Name:					
	First	Middle		Last	
Mailing Address:					
	Street/PO Box		City	State/Zip	
License Number: _			State of Issue	e:	
Dates of Employme	nt as a Principal: MM/DD/			:	
Approximate Number of Hours Worked Per Week:Total Hours Worked:					
I certify that during the and acted as a princip		ove I practiced with	in the legal scope o	of a licensed structural engineer	
Signature of Applicant: Date:				ate:	
	EMP	LOYER INFORM	MATION		
To Be Completed By	y The Supervising Enginee	er or Other Qualifi	ed 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 pro	vided above by the applican	t correct? Yes	☐ No, please atta	ach an explanation.	
Name:					
Title:		Date:			
Phone:					
License Number:					
State of Issue:			(Seal a	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 APP	<u>LICANTS</u>
All applicants are required to submit following items to com \$121.00 non-refundable application-processing fee, Supporting documentation for any "yes" answers pr	made payable to "DOPL".
APPLICANTS WITH A CURRE	NT NCEES COUNCIL RECORD
If you are applying with a current NCEES Council Record , must:	
Request that NCEES submit your current Council R contact NCEES at 1-864-654-6824, 1-800-250-3196	tecord to Utah. To obtain an NCEES Council Record, 6, or <u>www.ncees.org.</u>
APPLICANTS BY	ENDORSEMENT
If you have been licensed for at least one year, and are in go Utah, in addition to the items required for all applicants, you	ood standing in a jurisdiction designated as equivalent to
Please see <u>our website</u> for additional information regarding a required for your state or circumstances	approved jurisdictions, and if additional documentation is
APPLICANTS WITHOUT AN	NCEES COUNCIL RECORD
If you are applying for a Utah license without a council rec must provide:	
 Verification of meeting licensure education requirem Official transcripts documenting completion of a considered official when mailed directly to DOP with the school's stamp/seal on the envelope flaschool's registrar office to b5@utah.gov. 	nents through one of the methods below: an EAC/ABET accredited program. Transcripts are but from the school or when delivered in a sealed envelope ap. Transcripts may also be sent via secure email from the sing education program was completed in a foreign country,
contact NCEES Credentials Evaluations at www.your evaluation directly to DOPL.	w.ncees.org or 1-800-464-7650. Please have NCEES send
licensed as an engineer and practiced as a prin "Verification of Structural Engineering Experien you are verifying principal experience from subn Verification of passing the NCEES FE and SE. If yo	u passed the NCEES FE and/or the NCEES SE exam in on of your scores and license (if applicable) to be sent
	ng licensure for the time documented on your Verification of al: or
 Verification of Structural Engineering Experience 	ce form. All employers must complete a separate form. If you must submit verification of your licensure from that
APPLICANTS REINSTATING	AN EXPIRED UTAH LICENSE
If you were previously licensed in Utah, and your license has items required for all applicants, you must provide:	s been expired for more than 2 years, in addition to the censure listed above. Some information, such as exam and b verify before omitting an item.
Submit the above items with your completed application	
In Person or Via Express Delivery: Division of Occupational and Professional Licensing Heber M Wells Building, 1st Floor Lobby	US Postal Service: Division of Occupational and Professional Licensing PO BOX 146741

If you have questions, please contact the Division via our direct email address, b5@utah.gov, or via the phone or fax listed below.

Salt Lake City, UT 84114-6741

160 E 300 S

Salt Lake City, UT 84111