



Professional Land Surveyor License Experience Record

Follow all instructions carefully when completing this portion of the application. Failure to follow these instructions can result in deferral of your application. This form is intended to be submitted with your initial application, form number **NDPELS-PERS-03**. Applications that require this form must contain this form in order to be processed. If the Board office receives only this form without form number **NDPELS-PERS-03** it will be discarded. Applications being submitted with a completed NCEES record do **NOT** require this form.

References

North Dakota Century Code requires all Professional Land Surveyor applicants to submit a total of 5 references that can speak upon your character and professional reputation, at least 3 of those references must be licensed Professional Land Surveyors that can also speak upon firsthand knowledge of some of your engineering experience. These references cannot be members of the Board or relatives. Please list the names of your references and if applicable their registration number.

Name: _____
Registration Number: _____ State: _____
Address: _____
Telephone: _____
Email Address: _____

Name: _____
Registration Number: _____ State: _____
Address: _____
Telephone: _____
Email Address: _____

Name: _____
Registration Number: _____ State: _____
Address: _____
Telephone: _____
Email Address: _____

Name: _____
Registration Number: _____ State: _____
Address: _____
Telephone: _____
Email Address: _____

Name: _____
Registration Number: _____ State: _____
Address: _____
Telephone: _____
Email Address: _____

Work Experience

This is a 2-step process.

1.) Provide a list of all your employment. Gaps greater than 90 days will need to be accounted for. **If you are currently employed with an employer enter "Present" in the "To" column.**

Work Experience Table

E M P L O Y M E N T #	Dates <small>Must be entered in a Month/Year format.</small>		Name of Employer	Experience <small>Enter the years and months in each respective column that is applicable to you.</small>						
	Start Date	End Date		Surveying Experience		Non-Surveying Experience		Cadastral/PLSS Surveying Experience		
				Years	Months	Years	Months	Years	Months	
1										
2										
3										
4										
5										
6										
7										
Total:										
<small>If you have more than 7 employments, please add additional pages. See form number NDPELS-PERS-05C for additional tables.</small>										

2.) On the provided sheets you will need to provide detailed descriptions of each of your listed employments. Be sure to include any projects and describe the magnitude and complexity of the work as well as your duties and degrees of responsibilities. **Experience records without descriptions or inadequate descriptions will be returned to the applicant and can also be a reason for deferral of an application.**

Experience Detail Sheet

Use this sheet to provide your employment descriptions, if more space is needed, please attach additional sheets of paper. You will need to duplicate this page for each of your listed employment numbers.

Employment Number (from work experience table): _____

Name of Employer: _____

Title: _____

Dates of Employment: **From:** _____ **To:** _____

Description of Duties:



Reference Form

Applicant: You must fill out your name and attach an abstract of your employment descriptions from your experience detail sheets for your references to verify. Simply putting dates of employment will NOT qualify. Please send this form to each of your listed references.

Reference: Fill out this form completely including all comment sections, initial all experience you can substantiate and have firsthand knowledge of. Return this completed form to NDPELS, P.O Box 1357 Bismarck, ND 58502.

RE: Professional Land Surveying Application of: _____ (Name of Applicant in Full)

Reference Information:

Full Name: _____
Mailing Address: _____
Email: _____ Phone Number: _____

Are you currently a licensed Land Surveyor? [] Yes [] No

If yes, I am currently licensed in the state of: _____ My license number is: _____

How many years have you known the applicant? _____

In accordance with NDAC 28-03.1-01-17 (4) would you recommend the applicant listed above to be licensed as a Professional Land Surveyor? (If need please attach a septate piece of paper.) [] Yes [] No

Comments: _____

[] By selecting this box, you are attesting that you have firsthand knowledge of the applicant listed above, all these questions have been answered based upon your personal knowledge of the applicant and without assistance of the applicant. The record of the applicant, as verified here by you, will be accepted by the Board as a deliberate act made for the express purpose of acquainting the Board with facts, as you see them, relative to the applicant's competency to practice the profession for which he/she has applied for licensure.

Signature

Date

RE: Professional Land Surveyor Application of: _____
(Name of Applicant in Full)

Please initial all statements you can substantiate on this margin.

Name of Reference: _____

I cannot verify any of the listed experience. _____
(Please initial)