



Application for Professional Land Surveyor License

Fee: \$150.00

Check or Stripe Receipt Number: _____

Application for licensure via: Examination Endorsement

Social Security No.: _____

First Name Middle Name Last Name

Maiden Name: _____ Date & Place of Birth: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email Address: _____

Do you wish to receive email notifications in lieu of mailing in regards to your license? Yes No

Are you a member of the US Military or the spouse of a military member? Yes No

Have you ever applied for or been granted licensure in North Dakota? Yes No

If yes, please provide details: _____

Will you be submitting an NCEES record? Yes No If yes, list your NCEES record number: _____

If no, please submit form number **NDPELS-PERS-05** with your application.

Employer Information

Please enter your employer information, if you are claiming a sole proprietorship please enter "Sole Proprietor" in the company name space. Do not leave this section blank.

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Education

List in chronological order all college(s), university(s), or technical school(s) you received a degree from. If you are NOT submitting an NCEES record you are required by North Dakota Century Code to submit official transcript(s) for all completed degrees to the Board office. All non-US degrees are required to be submitted with a credentials evaluation from NCEES.

Name of Institution	Degree Granted	Major	Date Graduated
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

