

BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS

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## PROFESSIONAL ENGINEER ENGAGEMENT RECORD AND REFERENCE FORM

www.bpelsg.ca.gov

This form must be submitted for each engagement claimed as qualifying experience. Each engagement being claimed as qualifying experience must be summarized on a separate E ngagement Record and Reference Form. "SEE ATTACHED" and resumés are not acceptable in lieu of this form. *Part A of this form must be typed, or it will be returned to applicant.* 

The original of this form must be mailed to the Board Office postmarked by the Final Filing Date. Failure to have all documents in the Board Office bythe final filing date will result in the Applicant not being set to the current examination.

A copy of the Information Collection, Access, and Disclosure Notice must be provided by the applicant to the reference.

-		PART A – TO	BE COMPLET	ED BY THE A	APPLICAN	IT		
	t, hereby demonstrate quis detailed below.	ualifying experie	ence as required	by the Busines	s and Profe	ssions Code an	d the California Code of	
Last Name			First Name			Middle Nai	Middle Name	
Address of Record (Mailing Address):			City		State	Zip Code	Country	
Birth Date (MM/DD/YYYY): E-Ma		E-Mail Address:	Iress:			l .		
Daytime Phone Number (including area cod		de & extension):	extension): Evening Phone Number (i		including area code): Cell Phone Number (including area code):			
Engagement Number				Employer: Employer Address: City/State/Zip: Applicant's Title:				
	From: QUALIFYING EXPERIENC IN MONTHS (**SEE NOTE BELOW)			Reference's Name: Reference's Address: City/State/Zip:				
То:				Reference's Phone (including area code & extension):				
·	onsibility: Engineering Decisions l de project name, locatio		intry], & type):					
does not include omonths worked; it	overtime, training, orientatio	n, non-engineering hs Worked less No	g work, or summer w on-Qualifying Experi	ork while a stude ence. Qua <b>l</b> fying	nt. Qualifying experience n ards becomin	experience may l neans engineering	credit claimed for education. In the less than the total number of gemployment that requires the Engineer.	
••	confirm that I have reviewe	ed the information	contained on Part <i>I</i>					

Applicant's Full Name:\_\_\_\_\_

## PART B - TO BE COMPLETED BY REFERENCE

PLEASE PRINT CLEARLY AND COMPLETE THE ENTIRE FORM.
INCOMPLETE FORMS MAY CAUSE THE APPLICANT TO BE DEEMED INELIGIBLE.

You, as the reference, may request additional experience information from the applicant, including the Board's licensing requirements as contained in the Business and Professions Code and the California Code of Regulations. You must personally complete, sign, seal or stamp, and return both Part A and Part B of this form to the applicant in a sealed envelope. In Responsible Charge\* My relation with the Applicant has been/is: Employer/Supervisor Reviewed Work\* Other\* (check all that apply) Co-Worker/Associate\* YES\* Are you related to this Applicant by blood, marriage, or adoption? NO Do you verify the Applicant's experience on Part A, including position title and employment dates? YES YES Have you personally seen and reviewed the Applicant's engineering work? I have personal knowledge of the Applicant's work experience from the date of to the date of Do you consider the Applicant technically qualified NO\* to be licensed as a Professional Engineer? YES DO NOT KNOW\* \*Explain in detail all responses marked with an asterisk in this section. Also, include any additional information about the Applicant's engineering experience, capabilities, or limitations. ATTACH ADDITIONAL SHEETS IF NEEDED. If you and the applicant currently have different employers, please explain how you know of the applicant's experience. From personal knowledge, I verify that the applicant has the appropriate PLEASE AFFIX YOUR PROFESSIONAL experience in the following areas (check all that apply): SEAL OR STAMP HERE Technical Competency **Engineering Judgment** Professional Integrity/Ethics **Project Communications** Independent Decision Making Coordination of Project Support Staff Code/Regulatory Knowledge Responsible Charge Capability Your Title Your Name \_\_\_\_\_ Your Company Name \_\_\_\_\_ Lic No./Exp. Date Branch/State/Country \_\_ Address \_\_\_\_\_ OR – I am legally exempt from licensure because City/State/Zip Phone ( ) Ext. I certify under penalty of perjury that these statements are true and correct to the best of my knowledge and that I have personally reviewed and examined the applicant's engineering work. Signature of Reference: Date: \_\_