



BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS

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www.bpelsg.ca.gov



APPLICATION FOR APPOINTMENT TO TECHNICAL ADVISORY COMMITTEE BRANCH: _____

For Office Use Only	
Date Received:	_____
Staff Reviewer:	_____/_____ Initial Date
Board Member Review:	_____/_____ Initial Date
Date Appointed:	_____

Attach a RESUME summarizing your experience and other qualifications, including chronological employment history, education, etc.

1.	Last Name: _____			First: _____			Middle: _____			
2.	Street Address: _____				City: _____		State _____		Zip: _____	
3.	Telephone Home: _____			Work: _____			extension: _____			
4.	LIST BRANCHES OF ENGINEERING OR LAND SURVEYING IN WHICH YOU HOLD A VALID LICENSE IN CALIFORNIA									
	Branch			License Number			Date Issued		Expiration Date	
a.										
b.										
c.										
5.	List specific areas of technical expertise (e.g., HVAC design, structural design, toxics, boundary surveying):									
6.	List two non-family references who have personal knowledge of your experience and qualifications as stated herein.									
	Name			Address			Telephone No.		Professional Relationship	
(1)										
(2)										
7.	Are any of your licenses currently restricted in any manner? (e.g., suspended, probation, etc.) <input type="checkbox"/> YES <input type="checkbox"/> NO									
8.	Have you ever had a professional license suspended or revoked in any state? If YES, please explain fully on another sheet and attach. <input type="checkbox"/> YES <input type="checkbox"/> NO									
9.	Have you ever been convicted of a criminal offense (felony or misdemeanor) or entered a plea of nolo contendere (Convictions dismissed under Section 1203.4 of the Penal Code MUST be disclosed. Minor traffic violations resulting in a fine of \$150 or less do not need to be disclosed)? If answer is YES, explain fully on another sheet and attach. <input type="checkbox"/> YES <input type="checkbox"/> NO									
10.	Are you subject to pending disciplinary action in any state? If answer is YES, please explain fully on another sheet and attach. <input type="checkbox"/> YES <input type="checkbox"/> NO									
11.	Please list any professional group, affiliation or association to which you belong. Indicate any past or current positions or offices held in each listed.									
12.	I certify under penalty of perjury under the laws of the State of California that the information on this application as well as any other attachments included herewith is true and correct to the best of my knowledge.									
	Signature of Applicant: _____							Date: _____		

NOTICE: Each individual has the right to review the files or records maintained on them by the agency unless the records are exempt under Section 1798.40 of the Information Practices Act.