



Louisiana Professional Engineering and Land Surveying Board

Application to add an Additional Exam Discipline to an existing Louisiana PE licensure

Applying under the provisions of La. R.S. 37:693(B)(2)(a): Examination

A \$50 non-refundable fee is to be submitted with this application. Make checks payable to LAPELS.

Do not complete this form until you have read and thoroughly understand this form and the [accompanying instructions](#). Do not leave any section blank and state "not applicable" or "none" if such is the case. **All information must be typed. Hand written applications are not acceptable.**

Date of application:

I wish to take

Engineering PE examination

Exam Date: April October

Year:

1. PERSONAL INFORMATION

| | | | | |
|----------------|---|-----------------|--------------------|--------------------|
| SSN: | Name: | | | |
| | Last Name | First Name | Middle/Maiden Name | Suffix |
| Address: | | | | |
| City: | | State: | Zip: | Country: |
| Work Phone: | Cell Phone: | Home Phone: | E-mail: | |
| Date of Birth: | City of Birth: | State of Birth: | Country of Birth: | |
| Gender: | US Citizen? Yes No If no, what country? | | | Visa/Green Card #: |

2. EDUCATION – only complete if you have obtained an additional degree subsequent to the LAPELS PE license

List in chronological order, the name and location of each college or university where a degree was conferred or is in progress, the time spent at each institution, and if graduated, the date of graduation, the degree received and the major as shown on your transcript. **See the instructions concerning submitting transcripts and if applicable, a credential evaluation. Transcripts must be submitted by your college/university directly to LAPELS**

| Institution Information | | | Years Attended | Graduation Date | Degree Received and Major |
|-------------------------|------|-------|----------------|-----------------|---------------------------|
| Type | Name | State | From - To | | |
| | | | | | |
| | | | | | |
| | | | | | |

3. VIOLATIONS

Have you ever been convicted of a felony or of a crime of moral turpitude or entered a plea of guilty or *nolo contendere* to a felony charge or to a crime of moral turpitude under the laws of the United States or any state, territory or district of the United States?

Mark one: Yes No

Have you ever been convicted of any crime or entered a plea of guilty or *nolo contendere* to any criminal charge an element of which is fraud or which arises out of your practice of engineering or land surveying?

Mark one: Yes No

Have you ever been convicted of any civil or criminal violation of, or entered a plea of guilty or *nolo contendere* to any criminal charge under, the Louisiana Campaign Finance Disclosure Act or any other campaign finance and/or practices laws of the State of Louisiana, the United States, or any state, territory or district of the United States?

Mark one: Yes No

If you have a license, permit or certificate to practice engineering or land surveying, has it ever been the subject of a disciplinary action by any state, territory or district of the United States?

Mark one: Yes No N/A

Are you an owner, partner, officer, director, managing member or supervising professional of a firm whose license, permit or certificate to practice engineering or land surveying has ever been the subject of a disciplinary action by any state, territory or district of the United States?

Mark one: Yes No

If the answer to any of these questions is "Yes", provide the date and the pertinent facts of the case or proceeding including its final disposition. Attach additional pages as necessary.

DISCLOSURE

As part of the application process, the Louisiana Professional Engineering and Land Surveying Board (LAPELS) will obtain a consumer report, which I understand may include information regarding my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

AUTHORIZATION

During the application process and at any time during the tenure of my licensure with LAPELS, I hereby authorize LexisNexis WorkPlace Solutions Inc., on behalf of LAPELS, to procure a consumer report which I understand may include information regarding my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from credit bureaus, court record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification and a written summary of consumer rights; to the extent such investigation includes information bearing on my character, general reputation, personal characteristics or mode of living.

Applicant Signature

Date

Print Name

Date of Birth *

Social Security Number *

* For Identification Purposes Only

4. ACKNOWLEDGMENT

I, the applicant named in this application, have read the contents hereof, and to the best of my knowledge, information and belief the statements and information in this application are true and correct in substance and effect and are made in good faith. I have not omitted any information requested in this application. I am aware that such an omission or untrue response may constitute fraud or deceit, material misstatement, perjury or the giving of false or forged evidence under Louisiana Revised Statutes 37:698 and 37:700. I understand and agree that any responses verifying my education, personal references, and experience shall be considered privileged and confidential and that this information was not reviewed by me nor will it be available for my inspection or review in the future.

I have read the Rules for Professional Engineers and Land Surveyors (LAC Title 46, Part LXI), and I agree to conduct my professional affairs in accordance with these rules.

Signature of Applicant: _____

For LAPELS office use only – do not write in this area

| | |
|------------|-------------|
| Check No. | Application |
| | CAVU |
| Check Amt. | NCEES |
| | Background |
| Comments: | NCEES E3 |



Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO US
All information will remain confidential.

Cardholder Name: _____

Name on Application: _____
(if different from credit card holder)

Billing Address: _____

Phone Number: _____ Email: _____

Credit Card Type: Visa MasterCard Discover American Express

Credit Card Number: _____

Expiration Date: _____ (MM/YY)

Card Identification Number (last 3 digits on the back of the credit card): _____

Amount to Charge (USD): \$ _____

I authorize LAPELS to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder: Print Name, Sign and Date below

Signature: _____

Print Name: _____

Date: _____

Once signed, return the completed form to:

LAPELS
9643 BROOKLINE AVENUE, SUITE 121
BATON ROUGE, LA 70809

| |
|---------------------------|
| OFFICE USE ONLY |
| Confirmation Number _____ |