



Louisiana Professional Engineering and Land Surveying Board

Application to add an Additional Exam Discipline for Licensure as a Professional Engineer by Examination

INSTRUCTIONS

You are applying to take an additional Principles and Practice exam discipline to add to your existing Licensure with LAPELS.

Additional information for the application process:

You must be duly licensed as a Professional Engineer with LAPELS.

Once you have passed the Principles and Practice of Engineering examination the additional discipline will be added to your existing credential.

NOTE: Applications are subject to revision and modification at any time. In order to ensure timely processing, please verify that you are submitting the most current version of our application form (see www.LAPELS.com).

- **Read all of the instructions before you begin.**
- Applications must be typed (hand written applications are not acceptable).
- Exam applications & all supporting documents must be received by the LAPELS application deadline.
- Complete all required sections of the application; incomplete applications will not be processed.

After you have completed the application you may submit the application one of two ways:

1. By mail to LAPELS, 9643 Brookline Avenue, Suite 121, Baton Rouge, LA 70809 with a check or money order in the amount of \$50.00 made payable to LAPELS.
2. By e-mail to applications@lapels.com with a payment authorization form in the amount of \$50.00.

Section 1 – Personal Information

- Open the appropriate application and complete all fields, entering your full legal name and social security number.

Louisiana Revised Statute 37:23 requires that every application by an individual for a professional license, permit or certificate shall require the applicant's social security number.

Disclosure of your social security number is mandatory for this purpose and for purposes of establishing, modifying or enforcing family and child support obligations and locating an individual who is under an obligation to pay family or child support under La. R.S. 46:236.1.1, et seq. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure, permit or certificate application. Disclosure of your social security number is voluntary for disclosure to other state regulatory agencies, testing and examination vendors, law enforcement agencies, and other private federations and associations involved in professional regulation. Such disclosure is for identification purposes only. Your social security number will not be released for any other purpose not provided by law.

- Enter dates using this format: MM/DD/YYYY.
- Do not leave any section blank. State 'N/A' where applicable.
- Provide a phone number and email address where you can be reached during the day.

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

Section 3 - Violations – if you answer yes to any of these questions, you must submit a detailed description for each violation. Use extra pages if necessary.

Section 4- Acknowledgement – sign and date. You may also include the digital signature.

Laws and Rules Quiz and Professionalism & Ethics Quiz – If you have not submitted within the past two years. Complete the Online Laws and Rules and the Online Professionalism & Ethics quizzes [here](#). You and the LAPELS staff will receive an email confirmation once you have achieved a minimum score of 90%.

It is your responsibility to submit a complete and accurate application, which includes the required/non-refundable application fee of \$50 (check, money order or credit card authorization form). Upon receipt of your application, the Board applications staff will process your paperwork and communicate with you concerning any missing or incomplete documentation. Processing time for a **complete** application is 6-8 weeks.

A letter will be mailed to you from LAPELS informing you of approval or disapproval.

PE Additional Discipline Check List

Cover Sheet

Applicant Name:			
Last four of SSN:		Included	Requested
Required Documents	Applicant Notes	Please check one	
Current Application			
Check, Credit Card Authorization Form or Money Order			
Trancsript - <i>only complete if you have obtained an additional degree subsequent to the LAPELS PE license</i>			
Active PE with LAPELS			
Required Online Application Quizzes		<i>completed - achieved 90% or better</i>	
Laws & Rules Quiz <i>(submitted online only If you have not submitted within the past two years).</i>			
Professionalism & Ethics Quiz <i>(submitted online only If you have not submitted within the past two years).</i>			
Comments:			



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 or Money Order payable to LAPELS or you may use the credit card authorization form. 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: <small>Last Name First Name Middle/Maiden Name Suffix</small>			
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

Have you been the subject of a disciplinary or enforcement action by the engineering or land surveying licensing authority in any state, territory or district of the United States?

Mark one: Yes No

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.

Electronic Signature (*type your name*)

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.

Electronic Signature (type your name): _____

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

Payment Type: Check # Credit Card Confirmation # Money Order #	Application
	CAVU
Payment 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:

City:

State:

Zip Code:

Phone Number:

Email:

Credit Card Type:

Visa

MasterCard

Discover

American Express

Credit Card Number:

Expiration Date:

Card Identification Number (3 digits on back of Visa/MC/Discover, 4 digits on front of AMEX):

Amount to Charge (USD):

Fee: \$

Service Fee: \$

Total: \$

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 and Date below

Electronic signature:

(type your name)

Date:

Once signed, click the Submit button below to email to LAPELS Applications staff, or return by mail with the completed application to the following address:

**LAPELS
ATTN: APPLICATIONS
9643 BROOKLINE AVENUE, SUITE 121
BATON ROUGE, LA 70809**

OFFICE USE ONLY

Application Type _____

Confirmation Number _____



Electronic Check Authorization Form

(U.S. Banks only)

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

Name on Account:

Name on Application:

(if different from account holder)

This is a business account

This payment is for a/an:

Billing Address:

City:

State:

Zip Code:

Country:

Phone Number:

Email:

Checking

Savings

Routing Number:

Account Number:

Yes, I authorize this transaction. Please print this page if you would like a copy of this authorization for your records. By checking "Yes" and opting to pay by electronic debit against the bank account specified above, I agree and stipulate to all statements:

1. I am the legal owner, have power of attorney, or have legal authority in relation to the bank account specified above to be used for payment.
2. Such bank account is open, validly issued, in good standing and able to accept electronic debits.
3. Louisiana Interactive or its agent is authorized to electronically debit the bank account shown above, and if necessary, to credit such account to correct any erroneous debits using an Automated Clearing House ("ACH") debit entry.
4. This ACH debit authorization will remain in full force and effect for this single debit entry only.
5. Louisiana Interactive or its agent may re-debit my account for the payment in the event such is dishonored by my financial institution, and is additionally authorized to charge the maximum return item processing fee according to the laws governing Louisiana Interactive's state.
6. For inquiries relating to this electronic debit authorization, including revocation of this authorization, I may contact Louisiana Interactive at 225-325-5450.
7. I understand the Originating ID for this transaction is "1522077581". Please make sure your banking institution has released any debit blocks (if applicable) for this ID to ensure successful payment.

I (we) agree that ACH transactions I (we) authorized comply with all applicable NACHA Rules and all applicable US law and the laws governing Louisiana Interactive's state.

Amount to Charge (USD):

Fee: \$

Service Fee: \$

Total: \$

Electronic signature:

(type your name)

Date:

Once signed, click the Submit button below to email to LAPELS Applications staff, or return by mail with the completed application to the following address:

LAPELS

ATTN: APPLICATIONS

9643 BROOKLINE AVENUE, SUITE 121

BATON ROUGE, LA 70809

OFFICE USE ONLY

Application Type _____

Confirmation Number _____