

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

900 S.W. Jackson Street, Suite 507 Topeka, Kansas 66612-1257
http://www.kansas.gov/ksbtp (785) 296-3053

All applicants should read all statutes, rules and regulations for specific detail regarding the application requirements.

IMPORTANT INFORMATION FOR COMITY ENGINEERING APPLICANTS

Enclosed is an application packet which includes one set of the necessary forms and instructions for making your application to the board. If you need more room than is provided on any of the forms, you may make copies of the blank forms and submit attachments.

COMITY APPLICANTS- Please carefully review the enclosed "Information for Comity Applicants," which describes the requirements for licensure by comity.

FILING DEADLINES- Your file will not be considered complete to be reviewed by the board until all required documentation has been received, including the completed application form; current fee; requisite references; official transcript; and verifications, where applicable; in accordance with K.S.A. 74-7018. All applications must be complete in the board office at least 30 days prior to the next scheduled meeting of the board. (See "Schedule of KSBTP Board Meetings" on our web site.)

NCEES RECORD- The Board does accept the NCEES Council record. If you are interested in having a council record prepared or sent, please call NCEES at 1-800-250-3196 or write to P.O. Box 1686, Clemson, SC, 29633.

SOCIAL SECURITY ADVISORY - Pursuant to K.S.A. 74-139 and 74-148, the Board requests that you provide your social security number. Providing your social security number is voluntary. Should you provide it, it may be disclosed to the Director of Taxation and/or the Kansas Department of Social and Rehabilitation Services (SRS) for child support enforcement purposes.

TRANSCRIPTS- Official transcripts are required for all educational credit claimed. If you have an official transcript, you may send it with your application form, or you may have it forwarded to the board by your school or with your NCEES Record. Transcripts transmitted via the internet are not acceptable. If originally licensed after Jan. 1, 1993, any applicant with a foreign baccalaureate engineering degree must also have their degree evaluated by an acceptable foreign degree evaluator. (See pg. 11 for instructions)

VERIFICATION OF EXPERIENCE AND REFERENCES - In accordance with K.A.R. 66-10-14(a), you must submit at least three references from licensed professional engineers. You must have a minimum of four years of experience verified by someone who is familiar with your engineering experience. Licensed individuals who verify your experience may be counted as one of the professional references. The professional reference forms must be returned directly to the board office from the person who is supplying the information. Individuals supplying references cannot be related to you.

APPLICATION FEE - \$250.00. Please make check or money order payable to: Kansas State Board of Technical Professions.

VERIFICATION OF EXAMS AND LICENSURE- Send the Verification of Record form to the state board from which you received your original registration with the instruction that the form be completed promptly and mailed directly to the Kansas Board of Technical Professions. If you took the Fundamentals of Engineering Examination (FE) in one state and the Principles and Practice of Engineering Examination (PE) in another state, a form must be sent to BOTH states. You may duplicate the form enclosed. If your original license is not current, you must also supply verification of a current license.

When your file is complete, it will be submitted to the board for their evaluation. You will be promptly notified of any action they may take on your application.

Following is a check-list for use as you prepare your application.

CHECK LIST

PE COMITY APPLICANTS WITHOUT NCEES RECORD

- _____ Send fee, completed application form, and professional experience record to the board office. Make check or money order payable to: Kansas State Board of Technical Professions.
 - _____ Send *official* transcript with your application or have it forwarded from your school. (Foreign degree transcript must be in English.)
 - _____ Send a copy of your professional experience record and a reference form to at least three licensed professional engineers who will provide a professional reference or who will verify your four years of experience.
 - _____ Send Verification of Record form to state board(s) who will verify your FE and/or PE scores and/or current licensure.
-

PE COMITY APPLICANTS WITH NCEES RECORD

- _____ Send completed application form (pages 3 & 6) and fee to the board office.
 - _____ Notify NCEES to send a copy of your Council Record to the Kansas Board, which includes your transcript, references, and experience record.
-

Mail all application materials to:

Kansas State Board of Technical Professions
900 SW Jackson St., Suite 507
Topeka, KS 66612-1257

Any questions regarding your application should be directed to (785) 296-3053.

Name of Applicant _____

PROFESSIONAL EXPERIENCE RECORD

Important: Read all instructions in this section before completing experience record.

1. In chronological order beginning with first engagement after your degree, enter month and year of engagement. The letter (a) designates your first experience engagement. Letter subsequent engagements consecutively with (b), (c), etc. Engagements can be divided by company or by supervisor.
2. State the title of your position, the name and location of your employer. **Engineering engagements must be explained in detail giving specific project examples.** If you have been employed by more than one employer, each is considered a separate engagement. Do not leave any gaps in experience.
3. Using years and months, enter total time spent on engagement in Column 1. Enter the portion of your time spent in activity other than engineering in Column 2. Enter the portion of your time spent in engineering in Column 3. Columns 2 and 3 should equal Column 1. **Then, enter all column totals at the bottom of each column.**
4. Four years of professional engineering experience must be verified by an employer/supervisor. List the name(s) and license number(s) of the individual(s) providing this verification in Column (4) beside the appropriate engagement. (See Sample below.)
5. You are required to have a total of at least three references from licensed professional engineers. If your employer/supervisor is licensed, you are required to supply two additional professional references. If your employer/supervisor is not licensed, you must supply three other professional references.
6. Send a reference form and a copy of your experience record to each individual who will be providing an experience verification or professional reference.

From (MM/YY)	To (MM/YY)	Experience Engagements	(1) Total Time	(2) Non- Engineering	(3) Engineering	(4) List the name(s) and Professional License Number(s) of the employer/supervisor(s) providing verification of 4 years of experience beside the appropriate engagement
SAMPLE	06/87 12/89	(a) Senior Engineer; XYZ Engineering 900 SW Jackson Topeka, KS 66612 Solid waste landfill design; remedial investigation of a former disposal site, leading to supporting conceptual design of a RCRA landfill cap; remedial investigation of a former gun-shooting range, leading to conceptual design of soil (lead) removal & fill replacement; compliance inspections of railroad maintenance and industrial facilities.	18 mo.	0	18 mo.	Jane Doe, PE KS License #20001 SAMPLE

From (MM/YY)	To (MM/YY)	Experience Engagements	(1) Total Time	(2) Non- Engineering	(3) Engineering	(4) List the name(s) and Professional License Number(s) of the employer/supervisor(s) providing verification of 4 years of experience beside the appropriate engagement
		TOTALS (COLUMN 1 = 2 + 3)				

4. **CERTIFICATE OF AUTHORIZATION REQUIREMENT** - Are you practicing (contracting) or offering to practice a technical profession through a corporation? ____Yes ___No If you have indicated yes, then a certificate of authorization application packet will be mailed to you. In accordance with K.S.A. 74-7036, any corporation practicing, or offering to practice a technical profession in Kansas must obtain a certificate of authorization. If the corporation you are practicing through already holds a certificate of authorization in Kansas, please complete the following information:

Name Of Firm:_____ Certificate of Authorization Number_____

5. **SIGNATURE** - Have you ever been convicted of a felony, or had any disciplinary or administrative action commenced against you? ___Yes ___ No (If "Yes", please explain.)

I hereby certify that all statements in this application are made to the best of my knowledge and belief.

(Signature)

(Date)

Mail your application form, fee, and application documents to:

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS
900 S. W. Jackson, Suite 507
Topeka, KS 66612-1257
(785) 296-3053

APPLICATION FEE: \$ 250.00

Make check or money order payable to: **Kansas State Board of Technical Professions**

NOTE: Application Fees are NON-REFUNDABLE. Pending application files may be retained for a period of one (1) year, after which time a new application and fee must be submitted.

IT IS YOUR RESPONSIBILITY TO KEEP A COPY OF THIS APPLICATION FOR YOUR RECORDS

COMITY APPLICANTS: ALL APPLICATIONS MUST BE COMPLETE IN THE BOARD OFFICE AT LEAST 30 DAYS PRIOR TO THE NEXT SCHEDULED MEETING OF THE BOARD

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

http://www.kansas.gov/ksbtp (785) 296-3053
Suite 507, Landon State Office Building
900 SW Jackson Topeka, KS 66612

REFERENCE FORM

PROFESSIONAL ENGINEERING LICENSE BY COMITY

To be filled out by Applicant:

- 1. Your Name: _____
- 2. Date References should return this form to the KSBTP office:

- 3. Name and Address of person to whom you are sending this form:

To the Reference:

In accordance with K.A.R. 66-10-14(a), the applicant named above has given your name as a supervisor for or one who is intimately acquainted with one or more experience engagements listed in the experience record form accompanying this reference form. This Board is required by law to obtain evidence of the technical ability of applicants for registration. Statements by responsible individuals with personal knowledge of the applicant's qualifications will be considered as evidence. Additional information may be attached.

The Board would like to emphasize that evidence submitted on this form must not be perfunctory nor made for the mere purpose of aiding the applicant to be registered. The execution of this statement will be accepted by the Board as a deliberate act made with full knowledge of the responsibility to protect the public health, safety and welfare. Please remember that the applicant is not being considered for membership in an organization but for licensure as a professional engineer in Kansas.

Since the Board cannot process this application until it receives this reference, a prompt reply will expedite our handling of the application. **Your professional seal is required on this form. If you have no seal, please send a copy of your license.**

THE INFORMATION YOU GIVE WILL BE TREATED IN THE STRICTEST CONFIDENCE.

This form is to be returned **directly** to the board office at the following address:

**KANSAS STATE BOARD OF TECHNICAL PROFESSIONS
900 SW JACKSON, SUITE 507
TOPEKA, KS 66612-1257**

Jean Boline, Executive Director

PROFESSIONAL ENGINEER REFERENCE FORM

Applicant's Name:	
Address:	

Have you and the Respondent been employed by or been members of the same firm? Yes No
 If yes, please supply the following information:

	FIRST Engagement	OTHER Engagement
From – To		
Name of Firm		
City		
Applicant's Position		
Respondent's Position		

Have you known each other in other circumstances? Yes No If yes, give dates and explain:

1. Is the above information correct as stated? Yes No If no, please explain: _____

2. How long have you known the applicant? _____
3. What is/was your business relationship to the applicant? _____
4. How many years has the applicant been engaged in professional engineering work? _____

5. How many years in engineering design?

6. How many years in responsible charge of engineering work? _____
7. Would you recommend this applicant to be licensed: Yes No
 Comments: _____
8. How would you rate the applicant's :

	Excellent	Satisfactory	Poor
Reputation	_____	_____	_____
Technical Knowledge	_____	_____	_____
9. Other comments: _____

Name of Respondent _____

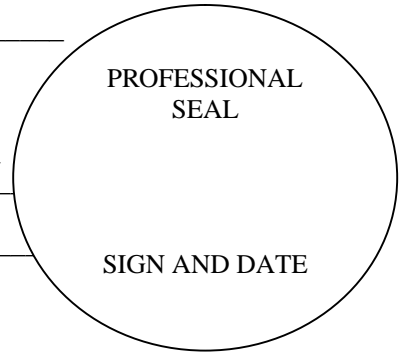
Respondent's Engineering Licensure: Jurisdiction _____ License # _____

Year _____ Discipline _____

Name of Respondent's Firm _____

Position in Firm _____

Address: _____



VERIFICATION OF RECORD

To: Kansas State Board of Technical Professions
900 SW Jackson, Suite 507
Topeka, KS 66612-1257

(Name)

(Address)

From: _____

(Board Making Certification)

(City) (State) (Zip)

XXX-XX-
(Last four digits of SS#)

I. THE ABOVE NAMED PERSON WAS REGISTERED AS:

	Cert. Number	Date Issued	Valid Until	Date Applied
<input type="checkbox"/> Intern Engineer	_____	_____	_____	_____
<input type="checkbox"/> Professional Engineer	_____	_____	_____	_____
<input type="checkbox"/> Intern Land Surveyor	_____	_____	_____	_____
<input type="checkbox"/> Land Surveyor	_____	_____	_____	_____

II. MINIMUM REQUIREMENTS WERE:

- | | Hours | Results | NCEES | Exam Date |
|---|--|-----------------------|-------|-----------|
| <input type="checkbox"/> 1. Written Examination | FE _____
PE _____
FLS _____
PLS _____ | _____ | _____ | _____ |
| Other _____ | | | | |
| <input type="checkbox"/> Examination Option: (Discipline) | _____ | | | |
| <input type="checkbox"/> 2. Oral Examination | _____ Hrs. | | | |
| <input type="checkbox"/> 3. FE/FLS Accepted from: | _____ | | | |
| PE/PLS Accepted from: | _____ | | | |
| <input type="checkbox"/> 4. Comity with _____ | | | | |
| <input type="checkbox"/> 5. Education and Experience: | _____ Yrs. Education | _____ Yrs. Experience | | |
| <input type="checkbox"/> 6. Other: Please give details on reverse side. | | | | |

III. INVESTIGATION AND/OR COMPLAINTS (Give details on reverse side.)

- 1. An investigation is in progress on the above named. Yes _____ No _____
- 2. A complaint has been filed against the above named. Yes _____ No _____
- 3. Disciplinary action has been taken against the above named. Yes _____ No _____

By: _____

Title: _____

(Board Seal)

Date: _____

STATE BOARD OF: _____

Kansas State Board of Technical Professions

COMITY/RECIPROCITY INFORMATION

Pursuant to K.S.A. 74-7024, the Kansas board will accept an applicant by comity or reciprocity provided the qualifications at the time the original license was issued would have met Kansas requirements if the application had been made in Kansas on that date. The board will not, however, license an applicant by comity or reciprocity whose original license was granted under a "Grandfather Clause".

REQUIREMENTS FOR PROFESSIONAL ENGINEERS

If you were originally licensed:	<u>Kansas requirements</u>
Prior to 1947	(a) none
1947 - 1952	(a) Accredited engineering degree; or (b) 8 years experience and 16 hours examination; or (c) 35 years of age plus minimum of 12 years experience
1953 - 1960	(a) Accredited engineering degree and 4 years experience; or (b) 8 years experience plus 16 hours examination; or (c) 35 years of age plus minimum of 12 years experience
1961 - 1968	(a) Accredited engineering degree, 4 years experience and 16 hours examination; or (b) 8 years experience and 16 hours examination; or (c) 12 years or more experience plus 8 hours examination
1969 - 1977	(a) Accredited engineering degree, 4 years experience and 16 hours examination; or (b) 8 years or more experience and 16 hours examination; or (c) Accredited engineering degree, 12 years or more experience, and 8 hours examination
1978 - 1992	(a) Accredited engineering degree, 4 years experience and 16 hours examination; or (b) 8 years or more experience and 16 hours examination; or (c) Accredited engineering degree, 25 years or more experience, oral fundamentals exam and 8 hours written exam
1993 - Present	(a) Accredited engineering degree, 4 years experience and 16 hours NCEES examination

Kansas State Board of Technical Professions

SPECIAL INSTRUCTIONS FOR APPLICANTS
WITH BACCALAUREATE ENGINEERING DEGREES FROM OUTSIDE THE US

If originally licensed after Jan. 1, 1993, any applicant with a baccalaureate engineering degree from outside the United States must have that degree evaluated by an acceptable foreign degree evaluator before educational credit may be considered by the board. According to K.A.R. 66-9-4, a college or university program that is adequate in its preparation of students for the practice of engineering means a baccalaureate engineering curriculum accredited by the Accreditation Board for Engineering and Technology (ABET). Any other engineering curriculum which has not been accredited by ABET but has been evaluated and found to be of an equivalent standard, may be reviewed and accepted by the board.

The application forms for conducting this evaluation may be obtained by contacting an acceptable foreign degree evaluator from the following list (as of Nov. 1, 2006):

THE CENTER for Professional Engineering Education Services
PO Box 720010
Miami, FL 33172
Website: www.cpees.org
Telephone: 1-800-464-7650

NOTE: ALL QUESTIONS REGARDING THE EVALUATION OF YOUR DEGREE SHOULD BE DIRECTED TO THE EVALUATOR.

The Board of Technical Professions will make the final determination of whether your education meets the educational requirement per K.A.R. 66-9-4.

You are encouraged to send your degree materials as soon as possible since a thorough evaluation of educational credentials could take several months.