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PROFESSIONAL LAND SURVEYOR ENGAGEMENT RECORD AND REFERENCE FORM

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 Engagement 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 by the 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 COMPLETED BY THE APPLICANT				
I, the Applicant, hereby demonstrate qualifying experience as required by the Business and Professions Code and the California Code of Regulations, as detailed below.				
Last Name		First Name		Middle Name
Address of Record (Mailing Address):		City	State	Zip Code
Country				
Birth Date (MM/DD/YYYY):		E-Mail Address:		
Daytime Phone Number (including area code & extension):		Evening Phone Number (including area code):		Cell Phone Number (including area code):
Engagement Number	TOTAL TIME WORKED IN MONTHS (for this engagement)			Employer's Name: Employer's Address: City/State/Zip: Applicant's Title:
	DATES (MM/DD/YYYY)		TOTAL MONTHS	
	From:	To:		
RESPONSIBLE TRAINING		MONTHS		Reference's Name: Reference's Address: City/State/Zip: Reference's Phone (including area code & extension):
How many of the total months above are claimed as responsible field training for this engagement?				
How many of the total months above are claimed as responsible office training for this engagement?				
All of the following items must be completed.				
Description of Land Surveying Tasks & Duties:				
Level of Responsibility (i.e., rod person, instrument person, party chief, survey computations, map preparation, etc.):				
Description of Land Surveying Decisions Made:				

**** Qualifying experience claimed for this Engagement includes only subordinate level land surveying. It does not overlap with credit claimed for education. It does not include overtime, training, orientation, non-surveying work, or summer work while a student. Qualifying experience may be less than the total number of months worked; it is computed by Total Months Worked less Non-Qualifying Experience. Qualifying experience means land surveying employment that requires the applicant to use sound judgment in making land surveying decisions and contributes to progress towards becoming a Professional Land Surveyor.**

Signature of Applicant _____

Date: _____

I, the Reference, confirm that I have reviewed the information contained on Part A of this form.

Signature of Reference _____

Date: _____

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 this both Part A and Part B of this form to the applicant in a sealed envelope.

My relation with the Applicant has been/is: Employer/Supervisor In Responsible Charge*
(check all that apply) Co-Worker/Associate* Reviewed Work* Other*

Are you related to this Applicant by blood, marriage, or adoption? YES* NO

Do you verify the Applicant's total experience on Part A, including employment dates?
(Refer to Board Rule 425 [16 CCR §425].) YES NO*

Do you verify the Applicant's responsible field training on Part A, including number of months?
(Refer to Board Rule 425 [16 CCR §425].) YES NO*

Do you verify the Applicant's responsible office training on Part A, including number of months?
(Refer to Board Rule 425 [16 CCR §425].) YES NO*

State the last date you directly or indirectly observed the Applicant performing land surveying duties: _____
I observed the applicant: DIRECTLY INDIRECTLY*

Do you consider the Applicant technically qualified to practice as a licensed Professional Land Surveyor? YES NO* DO NOT KNOW*

***Explain in detail all responses marked with an asterisk in this section. Also, include any additional information about the Applicant's land surveying 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.**

Your Name _____
Lic. No./Exp. Date _____
Branch/State _____
Your Title _____
Your Company Name _____
Address _____
City/State/Zip _____
Phone () _____ Ext. _____

PLEASE AFFIX YOUR PROFESSIONAL SEAL OR STAMP HERE

I certify under penalty of perjury that I have read and understand the laws, rules, and regulations regarding licensure as a Professional Land Surveyor relative to this applicant's qualifications and that this document accurately reflects my opinion and knowledge of the applicant's qualifications, professional integrity, ability, and fitness to be licensed as a Professional Land Surveyor. I also certify under penalty of perjury that I am authorized to practice land surveying and that the forgoing statements are true and correct to the best of my knowledge.

Signature of Reference: _____ Date: _____