### **ENGINEER**

# INSTRUCTIONS FOR COMPLETING AN APPLICATION FOR NCEES FUNDAMENTALS EXAM AUTHORIZATION

NOTICE: KNOWINGLY MAKING A FALSE STATEMENT IN CONNECTION WITH YOUR APPLICATION MAY BE CAUSE FOR DENIAL OF YOUR APPLICATION AND/OR REFERRAL FOR CRIMINAL PROSECUTION.

Please review the Arizona Board of Technical Registration (AZBTR) **Rules** and **Statutes** on the website carefully. They establish the requirements for examinations and explain Board procedures. It is very important that you become thoroughly familiar with the Statutes and Rules.

- Complete each section of the application following instructions on the form and in Rule R4-30-204.
- Print the required information neatly or use a word processor. Be sure to sign it. If you require additional space, please attach a supplemental sheet of paper.
- The information on this website provides answers to the most frequently asked application related
  questions. All requests for information relating to your application status should be made in
  writing.
- Applicants requesting a waiver of exam must submit an application for waiver of examination. Please refer to the AZBTR website for the appropriate application.

Once the AZBTR receives a completed application, an application number will be assigned and a file established. **No refunds** will be made. It is your responsibility to ensure that your application is correct and complete. A completed application includes the following:

- Completed application with all questions answered, signed and dated
- A signed check or money order in the amount of \$100.00 for the application fee, made out to "Arizona Board of Technical Registration"
- Military status form
- Official college transcripts, if applicable
- Letter of Endorsement from college/university completed by dean or faculty advisor, to include applicant's degree program and estimated date of graduation, if applicable
- Three (3) Engineer Certificate of Experience forms, if applicable

All applicants must obtain pre-authorization approval to sit for an examination by:

The Arizona Board of Technical Registration: ALL candidates who wish to take the FE exam in Arizona must first apply to the Board for exam authorization approval. The Board's approval process may take eight to twelve weeks depending on the applicant's qualifications and timely submission of required documents. If the Board has not received an application from you and approved you to sit for a national examination, you will not be authorized to take an NCEES examination. If approved, you will have one year from the date of approval to take and pass the exam, otherwise you will need to re-apply and pay the application fee.

Mail completed applications with application fee to: Arizona Board of Technical Registration 1110 W. Washington Street, Suite 240 Phoenix, AZ 85007

Page 1 of 3 Revised 3/26/2024

#### Supporting documentation for application:

- The Board will maintain all documentation submitted (prior to applying) for a maximum of one year.
- Documentation from a previously submitted application may be used for a new application granted it falls within the AZBTR's retention schedule.
- Transcripts: Arrange to have copies of certified transcripts for all educational credit claimed sent directly from the Registrar. Electronic transcripts should be sent directly to licensing@azbtr.gov. The AZBTR will accept an education equivalency evaluation from a Board approved entity in place of official transcripts for foreign education. The evaluation must contain the applicant's graduation date. If the graduation date is not listed then official transcripts will be required. Please refer to A.A.C. R4-30-208 to determine the education allocation that may be applied to your degree.
- If an applicant is in their final year of baccalaureate, masters, or other degree program, in lieu of having official transcripts send to the Board, an endorsement letter must be submitted on behalf of the applicant from the college dean or faculty advisor. This can be mailed in to the Board or emailed directly to: Licensing@azbtr.gov
- Foreign degree transcripts must be translated to English and evaluated by an entity of the Board's choosing. Evaluations must be completed prior to submitting an application with the Board, as the process for evaluation may take several months. Final evaluations must be submitted directly to the Board by the evaluating entity. Evaluations will not be accepted from the applicant. If the graduation date is not shown on the evaluation, then official transcripts will be required.
- If you are not applying with education and wish to apply and meet the requirements to take the FE exam with verified work experience: Engineer Certificate of Experience forms must be submitted directly to the Board from the applicant's current or former supervisors who are registered engineers. The applicant is responsible for completing Section A of the form and mailing forms to the present and past supervisors. The sum of the eleven categories in the "Detailed Summary of Qualifying Experience" section of the form must total the amount (in months) of your employment with that particular company. The supervisors must complete Section B of the form and send all pages directly back to the Board. The Board will not accept forms that are submitted by the applicant and will not accept old forms previously submitted to any other jurisdiction.
- If the applicant cannot provide Engineer Certificate of Experience forms completed by supervisors, the applicant can submit a letter of explanation as to the reason why that requirement cannot be met and have Engineer Certificate of Experience forms submitted by professional references, at least two of whom are registered engineers for consideration. Please note that submission of these alternate forms will be considered, but may not be accepted as demonstrating necessary experience.

Page 2 of 3 Revised 12/7/2022

An application is not considered "administratively complete" until all of the verifying documentation has been received. You will receive a notice from the Board via regular mail and email when your application is received and administratively reviewed. If you do not receive a confirmation within two weeks, you are welcome to contact your Licensing Specialist by email. Please refer to the "About Us" "Staff" section on the website to obtain the email for your assigned Licensing Specialist. Application assignments are made based on the first letter of the applicant's last name.

#### Please refer to:

- A.R.S. §32.122.01
- A.A.C. R4-30-201
- A.A.C. R4-30-204
- A.A.C. R4-30-208

Page 3 of 3 Revised 5/12/2022

# APPLICATION FOR NCEES FUNDAMENTALS OF ENGINEERING (FE) EXAM AUTHORIZATION

# PLEASE TYPE OR PRINT LEGIBLY APPLICATION FEE \$100.00

Applicant must demonstrate at least 48 months of education and/or experience for Board authorization pursuant to R4-30-204.

# 1. GENERAL INFORMATION Name (First, Middle, Last): Date of Birth: Social Security # (mandatory): Residence Address: Apt/Suite/Unit: City, State, Zip: Mailing Address: Apt/Suite/Unit: City, State, Zip: If you have been legally known by another name(s) list here with explanation and submit relevant documentation with your application: 2. EDUCATION Name of Institution #1: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_ Mailing Address: Years attended: Major(s)/Minor(s): Degree Type: Name of Institution #2: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_ Mailing Address: Years attended: Major(s)/Minor(s): Degree Type: Education must be gained in accordance with A.R.S. 32-122.1. The Board must verify all education relevant to this application. Please request that the registrar's office of the college or university you attended directly forward certified transcripts to the Board. If applicant has not yet graduated from degree program, a Letter of Endorsement from the college/university must be sent. **Internal Use Only** Receipt Number: Amount Paid:

Page 1

Revised 11/22/2021

### 3. QUALIFYING EXPERIENCE

(Complete this section & Engineer Certificate of Experience form(s) on page 8-10 only if you are applying with work experience and not education)

| Phone Number:# of Hours Worked per Week:   |
|--|
| # of Hours Worked per Week:  |
|  |
| Job Title):  |
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|  |
| Your Supervisor:   |
| Phone Number:  |
| # of Hours Worked per Week:  |
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| Your Supervisor:   |
| Phone Number:  |
| # of Hours Worked per Week:  |
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| oard shall verify all experience relevant to this application.   |
| Certificate of Experience Form" provided in this application The Board may only credit experience obtained under the 1(D) & (E).   |
| must provide to the Board a written, sworn statement, ust request three professional references, unrelated to you, at experience on the "Engineer Certificate of Experience Form" completed form to the Board. |
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|----|-------|-----|-------|-----|-------|-----|---------------------|-------|----|
| 4. | CIVIN |     | I . A |     | J   T | 1/1 | <i>y</i> . <i>y</i> | אלווו |    |

| I certify the information contained in this application to be accurate, true and complete to the best of my      |
|--|
| knowledge. I authorize any individual, company or institution with whom I have been associated to furnish the    |
| Arizona State Board of Technical Registration with any information concerning my qualifications for              |
| professional registration/certification in Arizona, which they have on record or otherwise possess, and release  |
| the individual, company or institution and all individuals from all liability for any damage whatsoever incurred |
| by me as a result of their furnishing such information.  |
|  |

| Signature of Applicant | Date |  |
|------------------------|------|--|

The Board will verify your answers by searching public records databases. If the Board determines that any of your answers are incorrect, you may become the subject of an investigation. Making a false statement in connection with this application may be cause for denial of this application and/or referral for criminal prosecution.

- Arizona Revised Statutes ("A.R.S.") 41-1030(B) states that "[a]n agency shall not base a licensing decision in whole or in part on a licensing requirement or
  condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for
  imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or
  condition"
- A.R.S. 41-1030(D) states that "[t]his section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section."
- A.R.S. 41-1030(E) states that "[a] state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency's adopted personnel policy."
- A.R.S. 41-1030(F) states that "[t]his section does not abrogate the immunity provided by section 12-820.01 or 12-820.02."



# **State of Arizona BOARD OF TECHNICAL REGISTRATION**

1110 W. Washington Street, Suite 240, Phoenix, Arizona 85007 (602) 364-4930 FAX: (602) 364-4931 https://btr.az.gov/

### PREVIOUSLY SUBMITTED DOCUMENTS AFFIRMATION FORM

If you submitted an application to the Board previously, you may submit this form with your new application to request that the Board reuse documents provided with the previous application.

| reque   | ist that the Board reuse the following documents for the application attached.  |
|---------|---|
|         | "Architect Certificate of Experience Form(s)" previously provided in application  #   |
|         | "Engineer Certificate of Experience Form(s)" previously provided in application #   |
|         | "Geologist Certificate of Experience Form(s)" previously provided in application  #   |
|         | "Land Surveyor Certificate of Experience Form(s)" previously provided in application #  |
|         | "Landscape Architect Certificate of Experience Form(s)" previously provided in application #  |
|         | Certified Transcripts previously provided in application #  |
|         | License/Exam Verification(s) from other states and jurisdictions previously provided in application #   |
|         | "Arizona Statement of Citizenship and Aliens Status for State Public Benefits" form previously provided in application #  |
|         | Copy of a Government issued photographic identification previously provided in application #  |
| Laws (  | ning, I affirm that I understand that the Board must consider its Record Retention Schedule and Confidentiality (ARS 32-129), among other things, when determining my request, that the Board has the authority to deny my t and, if denied, I will be responsible for any missing documentation. |
| Signati | ure of Applicant Date   |
|         |   |

### **Engineer Certificate of Experience Form**

| Branch of Engineering being sought:  |  |
|--|--|
| SECTION A  |  |
| (To be completed by Applicant)   |  |
| Employer Name, Address, and Telephone  |  |
| The state of the s |  |
| Your Job TitleYour Supervisor/Reference Name and Job Title   |  |
| If the name given above is other than an immediate supervisor, indicate below the profession have chosen.  |  |
| Co-Worker Client Other Explain:  |  |
| DETAILED SUMMARY OF QUALIFYING EXPERI  | ENCE   |
| Note: The detailed summary should include a description of the projects you worked on an   | d a breakdown of time spent by   |
| category of experience. Please use next page to adequately detail your experience.   | an datas should week the first to the  |
|  | ese dates should match the dates observed<br>ervisor/reference on Section B) |
| Approximate Number of Hours Worked Weekly  | ,  |
| Experience Activity:   |  |
| Experience Activity:  Activity   | Total Mo   |
| Consultation (R4-30-222)(B)(1)   | 10001110   |
| Research Investigation (R4-30-222)(B)(2)   |  |
| Evaluation (R4-30-222)(B)(3)   |  |
| Planning (R4-30-222)(B)(4)   |  |
| Design (R4-30-222)(B)(5)   |  |
| Construction Review (R4-30-222)(B)(6)  |  |
| Administration (R4-30-222)(B)(7)   |  |
|  |  |
| Surveying (R4-30-222)(B)(8)  |  |
| Surveying (R4-30-222)(B)(8)  Editing or Writing (R4-30-222)(B)(9)  |  |
| Editing or Writing (R4-30-222)(B)(9)   |  |
| Editing or Writing (R4-30-222)(B)(9) Other Engineering Experience (R4-30-222)(B)(10)   |  |
| Editing or Writing (R4-30-222)(B)(9) Other Engineering Experience (R4-30-222)(B)(10) Sub-Professional Work (R4-30-222)(B)(11)  | ent dates listed above)  |
| Editing or Writing (R4-30-222)(B)(9) Other Engineering Experience (R4-30-222)(B)(10)   | te, true and complete to   |
| Editing or Writing (R4-30-222)(B)(9)  Other Engineering Experience (R4-30-222)(B)(10)  Sub-Professional Work (R4-30-222)(B)(11)  Grand Total (sum for all activities - should equal same # of months as employme  I affirm under penalty of law that the foregoing statements and supporting documentation are accurate the best of my knowledge. I understand that submitting a materially false statement in connection with grounds for denial of this application and/or referral for criminal prosecution.  | te, true and complete to   |

| Applicant Name: |                             |      |
|-----------------|-----------------------------|------|
|                 | <b>Detail of Experience</b> |      |
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| Applicant Name: |  |  |
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#### **SECTION B**

(To be completed by supervisor/reference)

The Board will rely on your answers to the questions below in determining whether or not this applicant should be issued a license to practice as a professional in Arizona. Please recognize the importance of this information and give due care to your responses. Use additional pages, if required. Please evaluate the qualifications of this applicant in the light of professional requirements. Please understand that, while an examination may determine an applicant's technical ability to do the standard task, it does not determine honesty, integrity, dependability, resourcefulness, judgment, ability to take responsible charge and other qualities and traits of character necessary in a competent and ethical professional. These characteristics show up in practice and are known only to the applicant's acquaintances and associates.

If you are not a professional registrant, you must include your resume.

| City, State, Zip  |                                 |                  |                                 |                    |                 |  |  |
|---|---------------------------------|------------------|---------------------------------|--------------------|-----------------|--|--|
| E-mail:   |                                 |                  |                                 |                    |                 |  |  |
| Your job title at the tir   | ne you supervis                 | ed/knew the ap   | oplicant                        |                    |                 |  |  |
| Have you personally s Does the information p (If "No" or "Don't Kn  | presented by the                | e applicant acc  |                                 |                    | e? Yes          | No N |  |
| Give the dates you obs  | served the applic               | eant performin   | g professional d                | uties, either dire | ectly or indire | ctly                                     |  |
| •   |                                 | -                |                                 |                    | •               | -  |  |
|   |                                 |                  |                                 |                    | manc            | ctry                                     |  |
| From your pe  | nt related to yoursonal knowled | ge, your apprai  | narriage?<br>isal of the applic | ant would be:      | Ye              | s No [                                   |  |
| Rating Factors  | Excellent                       | Very<br>Good     | Adequate                        | Below Par          | Poor            | Don't<br>Know                            |  |
| Quality of<br>Work  |                                 |                  |                                 |                    |                 |  |  |
| Technical<br>Knowledge  |                                 |                  |                                 |                    |                 |  |  |
| Professional<br>Attitude  |                                 |                  |                                 |                    |                 |  |  |
| Professional Judgement  |                                 |                  |                                 |                    |                 |  |  |
| Character & Reputation  |                                 |                  |                                 |                    |                 |  |  |
| Please include any  | nomonica von ba                 | vo vocandina t   | his applicant on                | a gamawata niaga   | of noney and    | auhmit with this                         |  |
| Do you believe the app  |                                 |                  |                                 |                    | Yes \ \ \ No    |  |  |
| (If you marked "No" of  |                                 | C                |                                 |                    | Don't Know      | _  |  |
| I affirm under penalty best of my knowledge registration is grounds | I understand that               | t submitting a n | naterially false sta            | tement in connec   | tion with an ap | plication for                            |  |
|   |                                 |                  |                                 |                    |                 |  |  |
| ignature  |                                 | ]                | Date                            |                    |                 |  |  |
| ignature<br>ngineer Professional R                                  |                                 |                  |                                 |                    |                 |  |  |

Place imprint of seal in the space to the right.

## Military Status - A.R.S. § 32-4304(A)(4)

Effective July 1, 2022, a regulating entity that issues an occupational or professional license shall "track veteran and military spouse status of applicants". All state agencies shall report the information to the Governor's office on an annual basis.

It is requested that you provide the following information in order for the Arizona Board of Technical Registration to comply with A.R.S. § 32-4304(A)(4):

| Are you active duty military?                             |
|---|
| yes   |
| no  |
| I do not wish to answer                                   |
| Are you a veteran?  |
| yes   |
| no  |
| I do not wish to answer                                   |
| Are you the spouse of an active duty military individual? |
| yes   |
| no  |
| I do not wish to answer                                   |
| Are you the spouse of a veteran?                          |
| yes   |
| no  |
| I do not wish to answer                                   |