



## APPLICATION FOR LICENSURE OF A PROFESSIONAL ENGINEER

- This application is for individuals licensed in another jurisdiction, or seeking reinstatement in Nebraska.
- Do not substitute a resume or other synopsis for any part of this application form.
- **NCEES Record Holders:** If you have asked NCEES to submit your record to the Nebraska Board, complete Section I and then proceed to Section V. You do not need to fill out Sections II, III, IV, submit a verification form, reference forms, or have your transcripts sent.
- **NCEES Account Holders:** Any information already included in your NCEES record does not to be submitted (i.e. license verifications and transcripts.)
- It is the responsibility of the applicant to ensure all verifications, references, and supporting documents are completed and received by the Board.
- Make checks payable to "Nebraska Board of Engineers and Architects" or "NBEA." Application fees are nonrefundable once deposited by the Board. In the event that your check is returned unpaid for insufficient or uncollected funds, we may re-present your check electronically. In the ordinary course of business, your check will not be provided to you with your statement.

### SECTION I: GENERAL INFORMATION

1. \_\_\_\_\_  
Full Legal Name (including full middle name) \_\_\_\_\_  
Maiden or Former Name (if applicable) \_\_\_\_\_
3. \_\_\_\_\_  
Social Security Number (last 4 digits) \_\_\_\_\_
3. \_\_\_\_\_  
License Discipline (request only one per application) \_\_\_\_\_
4. Previously licensed in Nebraska?\* ☐ No ☐ Yes License Number: \_\_\_\_\_

\* If you are requesting reinstatement, you must complete a Reinstatement Affidavit, and submit evidence of having completed 30 hours of continuing education for the two years immediately prior to the application date. One CE hours must address ethics. A CE log is available on our website. See Chapter 9 of the Board's rules for more information.

5. Do you have an NCEES Account/Record? ☐ No ☐ Yes NCEES Account No.: \_\_\_\_\_

#### 6. Mailing Address:

\_\_\_\_\_  
Firm Name (if applicable)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
ext

\_\_\_\_\_  
Alternate Telephone

\_\_\_\_\_  
ext

\_\_\_\_\_  
Fax



## SECTION II: EDUCATION

- Enter the name and location of the college or university, date of graduation, and type of degree received. A copy of your official transcripts or other documents issued directly by the granting institution of higher education, or its authorized agent verifying your graduation from an EAC/ABET- or CEAB-accredited engineering program is required to be sent directly to the Board. Electronic transcripts may be sent to the above email. If you have had your education verified with NCEES, you do not need to have a separate transcript submitted to the Board.
- Applicants with non-EAC/ABET- or CEAB-accredited degrees must have their education evaluated by NCEES Credentials Evaluations to determine if it meets the NCEES Education Standard. Please visit <http://ncees.org/credentials-evaluations/> for more info. The evaluation must be transmitted directly to the Board from NCEES.
- NCEES record holders do not need to complete this section or submit proof of graduation.

Name of Institution, Location (City, State, Country)	Date Graduated	Degree Received (BS, MS, etc.)	Major

## SECTION III: LICENSURE INFORMATION

- You must have your exam and current state of licensure verification(s) forwarded directly to the Nebraska Board. Use the Verification of Licensure and Examination of an Engineer attached to the end of this application. NCEES Account/Record holders do not need to complete this section if such verification is listed on your NCEES account.
- Some jurisdictions may require a fee for this service and processing times may vary. Contact the verifying jurisdiction to confirm whether a fee is required and instructions for submitting the request.

1. **Fundamentals of Engineering (FE) Exam:** State: \_\_\_\_\_ Date Passed: \_\_\_\_\_

2. **Principles and Practice of Engineering (PE) Exam**

State: \_\_\_\_\_ Date Passed: \_\_\_\_\_

3. **First License**

State: \_\_\_\_\_ Lic. #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

4. **Current License (If different from Question 3)**

State: \_\_\_\_\_ Lic. #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

## SECTION IV: REFERENCES

- List the names and contact information of three people unrelated to you who can attest to your good reputation and good ethical character. Each must be a professional engineer having personal knowledge of your engineering experience.
- All references must complete an "Engineer Reference" form and submit it directly to the Board.

- |  |  |
|--|--|
| 1. _____<br>Name<br><br>_____<br>Phone<br><br>_____<br>Email<br><br>_____<br>License number and state of licensure | 2. _____<br>Name<br><br>_____<br>Phone<br><br>_____<br>Email<br><br>_____<br>License number and state of licensure |
| 3. _____<br>Name<br><br>_____<br>Phone<br><br>_____<br>Email<br><br>_____<br>License number and state of licensure |  |



## SECTION V: EXPERIENCE

- *NCEES Record Holders: Provide all work history not included in your record, with your current at a minimum.*
- *All other applicants: Record your complete work history, beginning after college graduation and concluding with your present employment. You must account for the entire time period from graduation until now, including periods of unemployment, volunteer work, non-engineering work, and military experience.*
- *Do not substitute a resume or other synopsis for this section.*
- *Attach additional copies of this section if needed.*

Employment Dates Month/Day/Year	Title of position held, name and address of employer and a brief summary of the engineering work performed. Make description brief and concise.	Name, telephone number, address, and email of someone familiar with each work period, preferably the person to whom applicant reported. You may not list yourself.
From 10/1/2012	Mechanical Engineer, Smith White & Associates 123 Main Street Lincoln, NE 68521 <b>EXAMPLE</b>	<b>EXAMPLE</b> Casey Doe, PE 123 Main Street Lincoln, NE 68521 402-555-3746 <a href="mailto:cdoe@nebraska.gov">cdoe@nebraska.gov</a>
To 10/15/2016	Lead mechanical engineer and engineer-of-record. Project manager on many jobs as well as mechanical lead. Systems included chiller, cooling tower, condenser, steam, and boiler replacements. Projects also included several state university projects and City of Omaha projects.	
From		
To		
From		
To		
From		
To		
From		
To		



## SECTION VI: AFFIDAVIT

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:

- ☐ I am a citizen of the United States, **OR**
- ☐ I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are \_\_\_\_\_, and I have enclosed a copy of my USCIS documentation.

*Note: Provide an explanation, and official documentation if available, for each "YES" answer below.  
Licensure approval or renewal will remain pending until after review.*

1. Have you ever been denied a license to practice engineering or architecture in this or any other jurisdiction?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2. Has a complaint ever been filed or has formal disciplinary action ever been taken against you by a regulatory body for professional engineering or architecture in this or any other jurisdiction?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3. Have you ever voluntarily surrendered your professional engineer or architect license or entered into a negotiated settlement in order to avoid disciplinary action by a professional regulatory body in this or any other jurisdiction?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4. During the past 10 years, have you been convicted of a crime, other than a minor traffic violation, in this or any other jurisdiction?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
5. During the past 10 years, have you entered into a pretrial diversion program or similar pretrial procedure to avoid prosecution for a crime, other than a minor traffic violation, in this or any other jurisdiction?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6. Are there now any criminal charges, other than a minor traffic violation, pending against you in this or in any other jurisdiction?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
7. During the past 10 years, has a judgment been entered against you in a civil proceeding in this or any other jurisdiction involving fraud, misrepresentation, or professional malpractice?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
8. Is there any action or proceeding presently pending against you in any court or other tribunal in this or any other jurisdiction alleging that you committed fraud, misrepresentation, or professional malpractice?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

*I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate, and I understand that this information may be used to verify my lawful presence in the United States.*

*I will not represent myself as a professional engineer or offer to perform engineering services in the State of Nebraska until this application is approved and a professional engineer's license has been granted by the Board.*

*Unless my firm holds a current Certificate of Authorization, it is not authorized to offer or contract to perform engineering services in Nebraska until the application process is completed and a professional engineer's license has been granted by the Board.*

*I have read the Nebraska Engineers and Architects Regulation Act.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



## ENGINEER REFERENCE

- Section I is to be completed by the applicant.
- Section II is to be completed by the reference. If additional space is needed, please use the back of this form or a separate sheet of paper.
- All references must return this Engineer Reference form directly to the Board by email, fax, or mail at the address listed above. If the Engineer Reference is emailed or faxed to the Board, an original hard copy is not required. Engineer Reference forms received from applicants will not be accepted.

### SECTION I: TO BE COMPLETED BY APPLICANT

1. \_\_\_\_\_  
*Applicant Name (First, MI, Last)*
2. \_\_\_\_\_  
*Date*
3. \_\_\_\_\_  
*Phone Number*
4. \_\_\_\_\_  
*Email*
5. Application for licensure as a Professional \_\_\_\_\_ Engineer in Nebraska by: ☐ PE Exam ☐ Comity
6. Name of Reference: \_\_\_\_\_
7. Relationship to Reference: \_\_\_\_\_

### SECTION II: TO BE COMPLETED BY REFERENCE

1. Is the information in Section I correct as stated? ☐ YES ☐ NO  
If NO, please explain: \_\_\_\_\_
2. How long have you known the applicant? \_\_\_\_\_
3. Explain how the applicant is of good reputation and demonstrates good ethical character: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Explain how the applicant demonstrates adequate technical knowledge and skill: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Has the applicant's experience been in the discipline in which the applicant is seeking licensure? \_\_\_\_\_
6. If the applicant were licensed, would you employ him or her? ☐ YES ☐ NO

\_\_\_\_\_  
*Reference Name (Please Print)*

\_\_\_\_\_  
*Title or Position*

\_\_\_\_\_  
*Firm Name & Address*

\_\_\_\_\_  
*State of Licensure*

\_\_\_\_\_  
*License No.*

\_\_\_\_\_  
*Year Licensed*

\_\_\_\_\_  
*Reference Signature*

\_\_\_\_\_  
*Date*



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If NO, please explain: \_\_\_\_\_
2. How long have you known the applicant? \_\_\_\_\_
3. Explain how the applicant is of good reputation and demonstrates good ethical character: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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\_\_\_\_\_  
\_\_\_\_\_
5. Has the applicant's experience been in the discipline in which the applicant is seeking licensure? \_\_\_\_\_
6. If the applicant were licensed, would you employ him or her? ☐ YES ☐ NO

\_\_\_\_\_  
*Reference Name (Please Print)*

\_\_\_\_\_  
*Title or Position*

\_\_\_\_\_  
*Firm Name & Address*

\_\_\_\_\_  
*State of Licensure*

\_\_\_\_\_  
*License No.*

\_\_\_\_\_  
*Year Licensed*

\_\_\_\_\_  
*Reference Signature*

\_\_\_\_\_  
*Date*



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If NO, please explain: \_\_\_\_\_
2. How long have you known the applicant? \_\_\_\_\_
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\_\_\_\_\_  
\_\_\_\_\_
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\_\_\_\_\_  
\_\_\_\_\_
5. Has the applicant's experience been in the discipline in which the applicant is seeking licensure? \_\_\_\_\_
6. If the applicant were licensed, would you employ him or her? ☐ YES ☐ NO

\_\_\_\_\_  
*Reference Name (Please Print)*

\_\_\_\_\_  
*Title or Position*

\_\_\_\_\_  
*Firm Name & Address*

\_\_\_\_\_  
*State of Licensure*

\_\_\_\_\_  
*License No.*

\_\_\_\_\_  
*Year Licensed*

\_\_\_\_\_  
*Reference Signature*

\_\_\_\_\_  
*Date*



## VERIFICATION OF LICENSURE OR EXAMINATION OF A PROFESSIONAL ENGINEER

- Section I is to be completed by the applicant.
- Forward this form to the appropriate state board who will complete Section II and return directly to the Nebraska Board.
- Some jurisdictions charge a verification fee and processing times may vary. You will need to contact the verifying jurisdiction to confirm whether a fee is required and instructions for submitting a request.

### SECTION I: APPLICANT INFORMATION

NAME	LAST 4 DIGITS OF SSN
ADDRESS (STREET, CITY, STATE, ZIP)	

### SECTION II: VERIFICATION OF LICENSURE OR EXAMINATION

FROM (STATE BOARD NAME)	DATE
ADDRESS	FILE NO.

1. THE PERSON IDENTIFIED IN SECTION I IS OR WAS REGISTERED AS:	Certificate or License Number	Date Issued	Valid Until
<input type="checkbox"/> ENGINEER INTERN (EI)			
<input type="checkbox"/> PROFESSIONAL ENGINEER (PE)			

2. BASIS OF REGISTRATION				
A. <input type="checkbox"/> WRITTEN EXAMINATION	Hours	Results	NCEES Exam? (Yes / No)	Exam Date
F.E.				
P.E.				
B. <input type="checkbox"/> ENGINEER INTERN ACCEPTED FROM:				
C. <input type="checkbox"/> PROFESSIONAL ENGINEER ACCEPTED FROM:				
D. <input type="checkbox"/> OTHER:				

3. P.E. EXAMINATION OPTION (REQUIRED FOR NEBRASKA LICENSURE)
A. EXAM DISCIPLINE:

4. DENIAL, INVESTIGATIONS, AND/OR COMPLAINTS:		
A. Has the above-named individual ever been denied registration in your state? (if YES, please give details in REMARKS below or on reverse)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
B. Has a complaint been filed or has formal disciplinary action ever been taken against the above-named individual? (If YES, please give details in REMARKS below or on reverse)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

5. REMARKS:

6. VERIFIED BY:	
BY	BOARD SEAL
TITLE	DATE