

## Engineer-In-Training Long Form Registration Application

Apply for an Engineer-in-Training certificate.

Use this form if applying with education and experience, or experience only.

You will also need to:

- Complete the Engineer-in-Training Experience and Verification form
- Have official transcripts sent directly from your college or university (if you want education to be considered)

Apply online: https://professions.dol.wa.gov/s/

Or mail this completed form with a check or money order (payable to BRPELS): Board of Registration for Professional Engineers and Land Surveyors PO Box 3777 Seattle, WA 98124-3777

Once approved, we'll email you information on how to schedule your exam.

For questions email engineers@brpels.wa.gov or call: (360) 664-1575

Registration Application Fee - \$30

## Applicant

| TYPE or PRINT Name as you would like it to appear   | Maiden name (If any-will not appear on certificate) |    |       |                            |          |  |        |             |  |  |  |
|---|---|----|-------|----------------------------|----------|--|--------|-------------|--|--|--|
| Full legal name (First, Middle, Last)   |   |    |       |                            |          |  |        |             |  |  |  |
| Social Security number* (or ITIN, Green Card, Canadian SIN)   |   |    |       | Date of birth (mm/dd/yyyy) |          |  |        |             |  |  |  |
| Mailing address   |   |    |       |                            |          |  |        |             |  |  |  |
| City  |   |    |       | State                      | ZIP code |  | County |             |  |  |  |
| (Area code) Phone number  |   |    | Email |                            |          |  |        |             |  |  |  |
| Military? <i>(check if applicable)</i><br>Current or former:  |   |    |       |                            |          |  |        |             |  |  |  |
| Legal background<br>Has any court or licensing jurisdiction taken action against you for your practice in engineering<br>or land surveying? |   |    |       |                            |          |  |        |             |  |  |  |
| Name and location of colleges,  | Dates of attendance                                 |    |       |                            |          |  |        |             |  |  |  |
| universities, technical schools attended  | From  | То | Cu    | rriculum                   |          |  |        | Degree/Date |  |  |  |
|   |   |    |       |                            |          |  |        |             |  |  |  |
|   |   |    |       |                            |          |  |        |             |  |  |  |
|   |   |    |       |                            |          |  |        |             |  |  |  |

\*You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have an SSN or ITIN, leave that section blank. If you do have a SSN, ITIN or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

## 23202 - Applications

## **Experience record summary**

Applicant name \_

Please list all of your employers below beginning with the most recent. This list is to include the entire time from leaving college (if applicable) or beginning your engineering career to the present time. Those periods while in school, unemployed, or non-engineering work must also be included. If not verifying, indicate "No." Any experience not verified will not be counted towards the experience requirement.

| Verification number         From         To         Employer $(yes arms)$ 1         -   |                     | Time period (begin with most recent) |    |          | To be verified |
|---|---------------------|--------------------------------------|----|----------|----------------|
| 2   | Verification number | From                                 | То | Employer | (yes or no)    |
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|   | 19                  |                                      |    |          |                |
|   | 20                  |                                      |    |          |                |

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.



Date and place

Applicant signature

Providing any false information in this application may be cause for denial, suspension, or revocation of your professional license in the State of Washington.