



KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

900 SW Jackson Street, Suite 507, Topeka, KS 66612

(785) 296-3053 | <https://ksbtp.ks.gov>

APPLICATION FOR PROFESSIONAL SURVEYOR BY RECIPROCITY

INSTRUCTIONS: Applicants should read all statutes, rules and regulations for specific details regarding requirements. All statutes, rules & regulations are available on our website.

- ◇ Application must be complete.
- ◇ Applicants for licensure by Comity which have been approved by the Board are required to pass both one-hour sections of the **Kansas State Specific Exam** before a license will be issued. See information on last page of this application. For current information regarding the Kansas State Specific, please see our [Professional Surveyor's page](#).
- ◇ Certificate of Authorization: You must obtain a Certificate of Authorization if you will be practicing or offering to practice through a business entity in Kansas in order to be in compliance with the law in this state.

A COMPLETE APPLICATION WILL INCLUDE THE FOLLOWING:

1. **COMPLETED APPLICATION FORM** — Print completed form, sign and date, then send all information to KSBTP. Pending applications are kept on file for one year.
2. **NON-REFUNDABLE APPLICATION FEE \$250** — Make check or money order payable to: *Kansas State Board of Technical Professions*
3. **TRANSCRIPTS** — Send an "official," sealed transcript or have the school send a transcript directly to KSBTP. Do not send photocopies or unsealed transcripts. Foreign degrees must be evaluated by NCEES. (See Special Instructions listed below.)
4. **SURVEYING EXPERIENCE** — Applicants applying under K.A.R. 66-11-5(b)(3) must supply an experience record and reference. Supply verification of only the minimum required number of years of experience, even if more experience is acquired. In order to receive experience credit, any surveying work experience after May 1, 1988, must have been supervised by a licensed surveyor.
5. **PROFESSIONAL REFERENCES** — In accordance with K.A.R. 66-10-14(b), you are required to have at least *three* references from licensed surveyors or licensed engineers. At least one reference must be from a licensed surveyor. Professional reference forms must be returned directly to the Board office from the reference. Relatives may not serve as references. The Reference Forms may be 'handwritten.'
6. **VERIFICATION OF EXAMS AND LICENSURE** — Request an electronic verification through the NCEES verification system for all exams and one current license. Go to <https://verify.ncees.org/boards/1022>. Fill in the requested information and submit. Once the process has been completed and the Kansas Board has been sent your verification, you will receive an email notice. If the State Board you are requesting verification from is not listed on the NCEES form, contact that Board for instructions.

Application is not complete until the application and supporting documentation have been received by the board office. Only complete applications will be submitted to the Board for evaluation. Applicant will be notified in writing of Board action.

**MAIL COMPLETE APPLICATION FILE TO KSBTP AT ADDRESS LISTED ABOVE.
Handwritten or incomplete forms will NOT be accepted.**



KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

900 SW Jackson Street, Suite 507, Topeka, KS 66612
(785) 296-3053 | <https://ksbtp.ks.gov>

APPLICATION FOR PROFESSIONAL SURVEYOR BY RECIPROCITY

1. GENERAL INFORMATION:

Name: _____ Maiden Name: _____ Gender : _____
 (First/Middle/Last)

Social Security #: _____ Date of Birth: _____ Preferred Mailing: _____

Home Address: _____
 (Street Address) (City) (State) (Zip)

Cell: _____ Work: _____ Email: _____

Business Name: _____ Business Address: _____
 (Street Address) (City) (State) (Zip)

2. EDUCATION: (Information required even if submitting NCEES record)

Official Transcripts are: _____ Enclosed _____ School will send _____ In NCEES Record _____

*We will NOT accept unofficial transcripts, unsealed transcripts or photocopies/faxed copies.

Name & Location of Institution	Dates Attended	Date Graduated	Degree Received (i.e. BS Civil Engineering)

3. LICENSURE HISTORY: List Intern Certifications and Current PS License(s).

Type of Certificate or Exam	Original State	Date of Exam	NCEES Exam (Yes/No)	PASS or FAIL	License or Certificate Number	Date License Issued
Fundamentals of Surveying Exam						
Other Professional Surveying Exam						

4. LIST OTHER STATES WHERE CURRENTLY LICENSED: _____

5. CERTIFICATE OF AUTHORIZATION REQUIREMENT FOR BUSINESS ENTITY:

Will you be practicing, contracting or offering to practice a technical profession through a business entity in Kansas once approved for licensure? Yes No

If **YES**, once the Responsible Principal has been issued an individual Kansas license, submit a complete application for a KSBTP **Certificate of Authorization for a Business Entity** available on our website. In accordance with K.S.A. 74-7036, a business entity practicing or offering to practice a technical profession in Kansas must obtain a Certificate of Authorization.

If the business entity has a KSBTP Certificate of Authorization, please complete the following information:

Business Entity Name: _____ Certificate of Authorization #: _____

6. SIGNATURE: Have you ever been convicted of a felony, or had any disciplinary or administrative action taken against your license in another jurisdiction? Yes No | Felony Disciplinary Admin Action

If YES, please attach a letter of explanation & supporting documentation.

I HEREBY CERTIFY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND CORRECT.

Signature

Date

→ STOP HERE IF SUBMITTING NCEES RECORD ←

APPLICANT NAME: _____

PROFESSIONAL EXPERIENCE RECORD FOR SURVEYING: (One Engagement Per Form)

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

1. In chronological order beginning with first engagement, enter month and year of engagement. Do **NOT** use "Present". The letter (a) designates your first experience engagement. Letter subsequent engagements consecutively with (b), (c), etc.
2. State the title of your position and the name and address of your employer. Surveying experience must be explained in detail giving specific examples. If you have been employed by more than one employer, each is considered a separate engagement. Use a separate form for each engagement. **Do not leave any gaps in experience**. If your surveying experience was interrupted by work in other fields, illness, military service, unemployment, etc., complete the section titled "Non-Surveying Employment/Unemployment" on Page 4.
3. Enter amount of time spent (1) basic surveying, (2) progressive surveying. Use Years/Months. (Example: 3 years, 4 months)
4. Enter the name of the individual who will verify each engagement. Send a reference form and a copy of your experience record to individuals listed on this page that can verify the required years of experience. See "Comity Information" on Page 8 for amount of experience needed for licensure as a professional surveyor in Kansas. Remember you are required to have at least three references from licensed surveyors or licensed engineers with at least one from a licensed surveyor.

Engagement: _____ Position(s) Held: _____

Employer Name: _____

Employer Address: _____

Supervisor Name: _____ Supervisor License#: _____

Reference Name: _____ Reference License#: _____

Dates (MM/YY): From _____ To _____

Experience:

(1) Basic Survey Time: _____ (YEARS/MONTHS)

(2) Progressive Survey Time: _____ (YEARS/MONTHS)

****TO REPORT ADDITIONAL EXPERIENCE, PRINT THIS FORM, CLEAR IT, AND ENTER NEXT ENGAGEMENT(S).**

NON-SURVEYING EMPLOYMENT/UNEMPLOYMENT

APPLICANT NAME: _____

Engagement: _____ Position: _____

Dates (Month & Year): From _____ To _____

Engagement: _____ Position: _____

Dates (Month & Year): From _____ To _____

Engagement: _____ Position: _____

Dates (Month & Year): From _____ To _____

Engagement: _____ Position: _____

Dates (Month & Year): From _____ To _____

TOTAL NON-SURVEYING TIME: _____

SUMMARY OF PROFESSIONAL EXPERIENCE RECORD

Enter the total time from all surveying engagements in each category. (YEARS/MONTHS)

(1) Basic Surveying Time: _____ Y _____ M

(2) Progressive Surveying Time: _____ Y _____ M

(3) Total Surveying Time: _____ Y _____ M

KSBTP REFERENCE SUMMARY FORM

APPLICANT NAME: _____

Please list the name of licensed professionals who will provide references.

1.)
2.)
3.)

List references who can verify professional experience listed on experience record and are licensed in your profession. Use Reference Forms pages 6 & 7 for this purpose.

Applicant is are required to have at least *three* references from licensed surveyors or licensed engineers. At least one reference must be from a licensed surveyor. K.A.R. 66-10-9(d) requires that these professional engineers be licensed in the United States.

Send a copy of the completed professional experience record with reference form instructions (Page 6) to the three references. Professional reference forms must be returned directly to the board office from the person supplying the information. Relatives may not serve as references. The Reference Forms may be 'handwritten'

Incomplete reference forms will be returned back to the reference for completion.

PLEASE RETURN THIS FORM WITH YOUR APPLICATION



KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

900 SW Jackson Street, Suite 507, Topeka, KS 66612
(785) 296-3053 | <https://ksbtp.ks.gov>

NOTICE OF REFERENCE REQUEST

APPLICANT INFORMATION: (To be completed by APPLICANT)

1. APPLICANT NAME: _____
2. Date for form to reach KSBTP: _____

Reference Name: _____

Reference Address: _____

To the Reference: The applicant listed above has given your name as an employer or one who is 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 licensure. Statements by responsible individuals with personal knowledge of the applicant's qualifications will be considered as evidence. Additional information may be attached. The Reference Form may be 'handwritten'. Please write legibly.

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 licensed. 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. It should be borne in mind that the applicant is not being considered for membership in an organization but for licensure as a professional surveyor in Kansas.

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

THIS INFORMATION WILL BE TREATED IN THE STRICTEST CONFIDENCE.

The **REFERENCE FORM FOR EXPERIENCE VERIFICATION** (which should be enclosed with this Notice) is to be returned directly to the board office:

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



KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

900 SW Jackson Street, Suite 507, Topeka, KS 66612
(785) 296-3053 | <https://ksbtp.ks.gov>

REFERENCE FORM FOR EXPERIENCE VERIFICATION

APPLICANT NAME: _____

TO BE COMPLETED BY APPLICANT:		
Have you and the Reference been employed by or members of the same business entity?		Yes No
If YES , please complete the following information.		
	First Engagement	Other Engagement
From—To (MM/YY)		
Name of Business Entity		
City		
Applicant's Position		
Reference's Position		
Have you known each other in other circumstances?		Yes No
If YES , give dates and explanation: _____		

TO BE COMPLETED BY REFERENCE: (Reference form may be 'handwritten'. Please write legibly.)

1. I have known the applicant for _____ years, from _____ to _____. (MM/YY)
2. Is the information listed above correct as stated? Yes No If, no, explain on separate sheet
3. Professional relationship to applicant (i.e. supervisor, co-workers, etc.): _____.
4. How many years has applicant been engaged in surveying work? _____ In responsible charge of surveying work? _____
5. Would you recommend this applicant be licensed? Yes No

6.	Excellent	Satisfactory	Poor
Please rate applicant's:	—	—	—
Professional Reputation			
Technical Knowledge			
Competence			

OTHER COMMENTS: _____

I HEREBY CERTIFY THE ABOVE INFORMATION IS TRUE AND CORRECT.

Reference Name: _____ Phone: _____ Email: _____

Title: _____ Profession: _____

State: _____ License #: _____ Year Issued: _____

Company Name: _____

Company Address: _____



SIGNATURE

DATE

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

KANSAS 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.

REQUIREMENTS FOR PROFESSIONAL SURVEYORS

If you were originally licensed:	<u>Kansas Requirements</u>
Prior to 7/1/68	(a) 8 HOUR WRITTEN EXAMINATION
7/1/68 – 9/88	(a) Accredited engineering or surveying degree, 2 years experience, and 16 hours examination; OR (b) 6 years experience and 16 hours examination.
10/88 – 4/92	(a) Accredited engineering or surveying degree, 2 years experience, and the NCEES examination including 8 hours FS, 4 hours P&P, and 3 hours of Public Domain; OR (b) 6 years experience and the NCEES examination including 8 hours FS, 4 hours P & P and 3 hours of Public Domain;
5/92 – 12/92	(a) Accredited engineering or surveying degree, 2 years experience and the NCEES examination including 8 hours FS, and 6 hours P & P; OR (b) 6 years experience & the NCEES examination including 8 hours FS, and 6 hours P & P;
1993 - Present	(a) Accredited 4 year surveying degree, 4 years experience and NCEES examination including 8 hours FS, and 6 hours PS; OR (b) Accredited 4 year engineering degree OR (beginning Nov. 1, 2001) 4 year related science degree; 6 years of experience; and NCEES examination including 8 hours FS, and 6 hours PS; OR (c) Accredited 2 year surveying degree, 6 years experience, and NCEES examination including 8 hours FS, and 6 hours PS; OR (d) (Beginning June 29, 2007) completion of the Board’s “land surveying curriculum” as specified in K.A.R. 66-9-5(e), 6 years experience, and NCEES examination including 8 hours FS and 6 hours PS; OR (e) (Before July 1, 2012) 8 years surveying experience and NCEES examination including 8 hours FS, and 6 hours PS. (f) (Beginning December 4, 2020) successful completion of at least 12 semester hours of approved surveying coursework consisting of three semester hours in each of the following, from a school or college approved by the board: (1) Surveying measurements and analysis; (2) global positioning system (GPS) surveying techniques; 3) real property law; and (4) boundary control and legal principles.

**KANSAS STATE-SPECIFIC PROFESSIONAL SURVEYING EXAMINATION CONTENT
BEGINS OCTOBER 2012**

Applicants must pass open-book two part Kansas State Specific exam to be licensed.

PART I – GENERAL

One Hour all multiple choice

Kansas Minimum Standards for Property Boundary Surveys	54%
Rules and Statutes of the Kansas Board of Technical Professions	27%
Kansas State Plane Coordinate System	11%
Kansas Riparian Boundaries	8%

PART II–US PUBLIC LAND SURVEY SYSTEM

One Hour multiple choice & mathematical problems

Original GLO procedures, the GLO System as applied to Kansas, GLO Section protraction	30%
Numerical calculator problems applied to USPLSS for KS (Calc)	37%
Resurveys of the US Public Land Survey System	33%