

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

900 SW Jackson Street, Suite 507, Topeka, KS 66612
(785) 296-3053 | www.ksbtp.ks.gov

REQUIREMENTS FOR LICENSURE BY EXAM

1. Graduate of a baccalaureate engineering program accredited by the Engineering Accreditation Commission of ABET (EAC/ABET). **An engineering technology degree does not meet the educational requirements.**
2. Taken and passed the NCEES Fundamentals of Engineering Exam.
3. Completed four (4) years of satisfactory engineering experience under a licensed PE following the date you received an engineering degree.

ATTENTION APPLICANTS FOR NCEES COMPUTER-BASED EXAMS:

The transition to computer-based exams through NCEES has begun. **Please submit the Application for Professional Engineer Examination.** Upon passing the computer based exam, you will then need to submit the PE by Examination application to the Board for licensure. **Please be aware that you must meet Kansas requirements.** Taking and passing the computer-based discipline of the PE examination **does not** guarantee that your application for licensure as a Professional Engineer will be approved. Applicants must meet the requirements listed above in addition to successfully passing the computer-based discipline of the NCEES Principals and Practice of Engineering Test prior to being considered for licensure.

If you **FAILED** the computer-based discipline of the NCEES Principles and Practice of Engineering Test, you will need to re-schedule the examination with NCEES at www.ncees.org.

ATTENTION: KANSAS HAS DECOUPLED!

Applicants may now submit the Professional Engineer Examination application to be approved to sit for a PE exam **BEFORE** meeting the experience requirement. Once **all** requirements have been met, the PE by Examination application will be required.



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APPLICATION FOR PROFESSIONAL ENGINEER LICENSURE BY EXAM

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

- ◇ This application is to determine eligibility for exam and licensure for the Professional Engineering Exam. **DO NOT** register with NCEES until you receive your approval letter from the KSBTP.
- ◇ Exam results are reported to the **HOME MAILING ADDRESS** provided. Check the KSBTP website for the date on which exam scores were mailed.
- ◇ Review FAQs (Frequently Asked Questions) from the Engineers page on the KSBTP website.

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 (\$60)** — Make check or money order payable to: *Kansas State Board of Technical Professions*
3. **TRANSCRIPTS** — Applicants must be a graduate of a baccalaureate engineering program accredited by the Engineering Accreditation Commission of ABET (EAC/ABET), or equivalent as determined by the Board. Technology degrees are not accepted by the Board. Official transcripts are required for all educational credit claimed. Send an "official," sealed transcript or have the school send a transcript directly to KSBTP. Do not send photocopies or unsealed transcripts. Foreign baccalaureate engineering degrees must be evaluated by NCEES. (See Special Instructions listed below.)
4. **ENGINEERING EXPERIENCE** — See complete instructions on Page 3 under *Professional Experience Record*. Experience **begins with the date the baccalaureate degree was conferred**. In order to qualify for the Professional Engineering exam, applicant must have first passed the Fundamentals of Engineering exam.
5. **PROFESSIONAL REFERENCES** — Each engineering engagement must be verified by your immediate supervisor to obtain credit, even if your experience is exempt from the direct supervision of a licensed engineer. Applicant is required to have a minimum of three licensed professional engineers as references. 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 5) to the three references. Professional reference forms must be returned directly to the board office from the person supplying the information. The Reference Forms may be 'handwritten'
6. **VERIFICATION OF EXAM** — If you took the FE Exam in a state other than Kansas you must request verification of that exam to be sent to the Kansas Board using the NCEES electronic verification process. Go to <https://account.ncees.org/login>. 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.**

SPECIAL INSTRUCTIONS FOR APPLICANTS WITH BACCALAUREATE ENGINEERING DEGREES FROM OUTSIDE THE UNITED STATES: Any applicant with a baccalaureate engineering degree from outside the United States must have that degree evaluated by NCEES before educational credit may be considered by the Board.

NCEES CREDENTIALS EVALUATIONS | www.ncees.org | Phone: 1-800-250-3196 or (864) 654-6824
Request a report be sent to KSBTP

NOTE: All questions regarding the evaluation of your degree should be directed to NCEES.

- The Board will make the final determination of the education requirement per K.A.R. 66-9-4.
- Send degree materials as soon as possible as a thorough evaluation of educational credentials may take several months.

Keep a copy of this application for your records.



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APPLICATION FOR PROFESSIONAL ENGINEER LICENSURE BY EXAM

1. GENERAL INFORMATION:

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

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

Home Address: _____
(Exam Results mailed to this address) (Street Address) (City) (State) (Zip)

Cell: _____ Work: _____ Email: _____

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

2. CITIZENSHIP: Are you a U.S. Citizen? Yes No If YES, Birth Naturalized
If NO, please attach a recent photograph or other documentation that identifies you AND a copy of your alien registration.

3. EDUCATION: Official Transcripts are: Enclosed School will send Degree Eval Submitted
*We will NOT accept unofficial transcripts, unsealed transcripts or photocopies/faxed copies. Please notify Board of degree eval submission.

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

4. EXAM HISTORY: List all Engineering exams previously taken. As per K.A.R. 66-8-6, "any applicant for a license...who fails an examination on the first attempt may take the examination two additional times..."

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 Engineering Exam						
Other Professional Engineering Exam						

5. 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

(1) From MM/YY	(2) To MM/YY	(3) Experience Engagements	(4) Total Time YR/MO	(5) Non-Eng. YR/MO	(6) Eng. YR/MO	(7) Professional Reference Familiar with Engineering Engagement
		TOTALS (Column 4=5+6)				

(Y/M) (Y/M) (Y/M)

****To report additional experience, print this form, clear it, and enter next engagement(s).**

APPLICANT NAME: _____



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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: Any engineering experience credit requested after May 1, 1988 for an exam applicant, must be performed under the direct supervision of a licensed Professional Engineer, unless that work is exempt from this requirement as defined in K.A.R. 66-10-9(b)(2). The applicant listed above has given your name as a supervisor for or one who is intimately 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 engineer 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, pocket card, or online verification.**

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**



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REFERENCE FORM FOR EXPERIENCE VERIFICATION

APPLICANT NAME: _____

REFERENCE INFORMATION:

1. Are you a licensed/registered professional engineer? _____ State _____ License No. _____
2. During what years did you know the applicant well? _____
3. Job relationship? Supervisor _____ Fellow Employee _____ Other _____
4. Are you related to the applicant? Yes _____ No _____
5. Briefly state your opinion of the applicant's capabilities in engineering. _____

6. Please read the enclosed experience record form from the applicant. Indicate at the head of each of the following columns, the engagements (a, b, c, etc. from applicant's experience form) with which you are familiar and provide information in each respective column. Answer the following questions. Use 'n/a' if not applicable.

ENGAGEMENT:	()	()	()	()
A. Is engagement accurately described by applicant?				
B. Was the applicant working under your direct supervision for the work performed? (If YES, complete C through H. If NO, proceed to question #7.)				
C. If work was performed after May 1, 1988, 1) Was there a pre-job design conference w/supervisor & intern?				
2) A job/design interaction?				
3) A timely job/design interaction?				
4) And a post-job/design review?				
D. Did applicant have major responsibility?				
E. Did applicant receive close, moderate, or occasional supervision?				
F. Number of persons whose work the applicant directed.				
G. Percent of time spent in design or supervising other designing.				
H. Percent of time spent inspecting or supervising construction work.				

7. In your opinion, did the experience that you are verifying meet the requirement of K.A.R. 66-10-9(a) which states that the work experience shall expose the applicant to all phases of work integral to the discipline of engineering in which the applicant claims qualification to practice? Yes _____ No _____ (If No, please explain) _____

I HEREBY CERTIFY THE ABOVE INFORMATION IS TRUE AND CORRECT.

REFERENCE NAME: _____ PHONE: _____

TITLE: _____ EMAIL: _____

COMPANY NAME: _____

SIGNATURE

DATE



KSBTP REFERENCE SUMMARY FORM

APPLICANT NAME: _____

Please list the name and license number of the supervisor that will be verifying each engagement.

ENGAGEMENT	NAME OF SUPERVISOR	PROFESSIONAL LICENSE NUMBER

NOTE: Supervisor must be licensed in order to receive credit for any experience after May 1, 1998. if supervisor is not licensed, exemption from direct supervision of licensed engineer form on following page must be submitted **along with** the unlicensed supervisor's reference form.

LIST OTHER REFERENCES WHO ARE LICENSED

(ONLY IF YOU HAVE NOT LISTED A MINIMUM OF 3 LICENSED PE SUPERVISORS ABOVE)

NAME	LICENSE NUMBER

PLEASE RETURN THIS FORM WITH YOUR APPLICATION

KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

The Kansas State Board of Technical Professions is utilizing the following guidelines as they pertain to K.A.R. 66-10-9(b)(2), which states that engineering work shall be directly supervised and verified by a licensed professional engineer for work performed after May 1, 1988, except that direct supervision of a licensed professional engineer is not required of the employees of any person, firm or corporation not offering services in the technical professions to the public, although verification by the applicant's supervisor is still required.

GUIDELINES FOR DIRECT SUPERVISION

It is the position of the Kansas State Board of Technical Professions that the phrase "direct supervision" shall mean that there are clear indications of phased interaction between the professional acting as the supervisor and the I.E. (Intern Engineer). Such interaction should include: (1) a pre-job/design conference, (2) a job/design review, (3) timely job/design interaction, and (4) a post-job/design review.

While this phased interaction is not required to transpire in the same geographic location; at a minimum, the supervising professional shall review the job/design site to determine the applicability of the I.E.'s approval.

In the event that direct supervision is not available within the firm/organization, the Kansas State Board of Technical Professions may allow the job/design supervision to occur outside of the firm/organization, with a licensed P.E. of the appropriate discipline, providing the above requirements are met.

REQUEST FOR EXEMPTION FROM DIRECT SUPERVISION OF LICENSED ENGINEER

APPLICANT NAME: _____ **ENGAGEMENT:** _____

COMPANY NAME FOR THIS ENGAGEMENT: _____

EXPLANATION OF EXEMPTION FROM THE DIRECT SUPERVISION REQUIREMENT: