



**Section C. (to be completed by Verifier)**

Under the Rules of Professional Conduct, it is your primary obligation as a licensee to protect the safety, health and welfare of the public. Pursuant to that duty and responsibility, you are being asked to provide confidential information as to the minimum competence of the individual applying for licensure identified in Section A above, and to verify the experience claimed in Section B to the best of your knowledge and understanding.

1. Verifier's Name \_\_\_\_\_  
First Middle Last Generation (Sr, Jr, III)

2. Verifier's Title \_\_\_\_\_

3. What is your profession? Check all that apply.

		State(s)	License No.	Yr. Initial License Granted
Land Surveyor	<input type="checkbox"/>	_____	_____	_____
Other _____	<input type="checkbox"/>	_____	_____	_____

4. What is your personal and/or business relationship to the applicant? \_\_\_\_\_

5. Would you entrust the applicant with responsibility for an important land surveying project involving the welfare and safety of the public? \_\_\_\_\_

6. Using the interpretations below, how do you rate the practice and quality of performance of the applicant's land surveying work?

**INTERPRETATIONS:**

- Above Average: Performance unquestionably of a professional level demonstrating thorough competence and creative ability.
- Average: Work not distinguished in content, but indicating, under some supervision, the ability to protect life, health and property.
- Below Average: Performance needs careful checking and rather close supervision to meet requirements.
- Unsatisfactory: Work of poor quality, not up to minimum professional standards. Requires review and revision by associates or supervisors before execution. Is inadequate for "the purpose of safeguarding life, health and property."

Job Functions	Above Average	Average	Below Average	Unsatisfactory
Field Duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planning and Preparation Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section D. (to be completed by Verifier)**

During this time, were you a licensed land surveyor and did you supervise the applicant? Yes  No

To the best of your knowledge, did the applicant correctly describe his/her experience in Section B? If no, please provide an explanation on a separate sheet(s). Yes  No

Based on your opinion of the current knowledge, skills and capability of the applicant, do you recommend him/her for licensure at this time? Yes  No

Verifier's Signature \_\_\_\_\_

Place Seal Here

Date \_\_\_\_\_