STATE BOARD OF VERIFICATION

(State)

The person whose name and address appear below has made application for licensure with the Tennessee Board of Examiners for Land Surveyors and states that he/she is licensed to practice land surveying in your state.

APPLICANT ____________________________

ADDRESS ____________________________

Please furnish the Tennessee board with the following information regarding the above named applicant.

1. Written Examination  HOURS  RESULTS/SCORE  NCEES  DATE OF EXAM
   
   FS  ______  ________________  ______  __________
   
   PS  ______  ________________  ______  __________
   
   State/Other  ______  ________________  ______  __________

2. _____  FS accepted from __________________________________________

3. _____  PS accepted from __________________________________________

Has the above named person ever been disciplined by your Board or is disciplinary action pending? ________

If yes, please explain on reverse side.

Signed by ____________________________

Title ____________________________ (BOARD SEAL)

Date ____________________________

If a fee required, please notify the applicant, but do not delay the processing of this form

STATE BOARD RESPONDING – Please mail the form directly to the Tennessee board office – DO NOT return to the applicant.

IN-1784