Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8506
www.dpor.virginia.gov



Board for Professional Soil Scientists, Wetland Professionals, and Geologists GEOLOGISTS CERTIFICATION AND REINSTATEMENT APPLICATION Fee \$150.00

A check or money order payable to the <u>TREASURER OF VIRGINIA</u>, or a completed <u>credit card insert</u> must be mailed with your application package. APPLICATION FEES ARE NOT REFUNDABLE.

Select one method of Certification:

			Geologist E	Examination		1005			
			] Geologist \	Waiver		1021			
			Upgrade G	Geologist-in-Training	Examination	9005			
			Upgrade G	Geologist-in-Training	Waiver	9021			
			] Reinstatem	nent		4020			
	Professionals, and	d Geologists	?	ing designation thi		rd for Pro	fessiona	al Soil Scier	ntists, Wetland
2.	Name Last			First		Middle			Generation
0		C II	ו וימי וי			Wildaic			Generation
3.		rity Number es every applicant	or \\	umbers**: Virginia DMV Contro ifficate, registration or oth umber or a control numbe	er authorization to e				or occupation issued
4.	Date of Birth _	MM/DD/YY	YY						
5.	Mailing Address ( If a mailing address address will be p	is submitted, th	ne mailing	Cib.				Ctoto	7in Codo
6.	Street Address (P PHYSICAL A	PO Box <u>not</u> and	accepted)	City  Check here if Str	reet Address is the s	same as the N	Mailing Add	State dress listed abov	Zip Code ve.
7.	Email Address			City				State	Zip Code
8.	Contact Numbers	<u> </u>							
			Primary Telepho	ne	Alternate Telep	phone		Fa	ах
OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY#	2801	FILE #/LICEN	SE#		ISSUE DATE

9.	Have you passed a geology examination in any other local, state or jurisdiction (excluding Virginia)?									
	No		ure/Letter of Good Star	nding* from the						
	Certification of Regulant Status/Certification of Licensur national regulatory board.	* Certification of Regulant Status/Certification of Licensure/Letter of Good Standing must include exam scores from each local, state, or								
10.	<ul> <li>Do you hold a <u>current</u> Professional Geologist license, cer national regulatory body?</li> <li>No </li> </ul>	, and the second	,	local, state, or						
	Yes If yes, complete the following table and attach a co									
	State/ Introduction	nse, Certification or Registration No.	Expiration Date							
	An original certification of Licensure/Letter of Good Standing pr licensed for each state, territory, jurisdiction or possession of the registration number; 2) the initial date of licensure/certification/reg of licensure/certification/registration (i.e. exam, reciprocity, experie)	United States is required. Ce istration; 3) the expiration da	ertifications must include: 1) the ate of the license/certification/re	license/certification/						
11.	I. Indicate the highest level of education you have completed.	Indicate the highest level of education you have completed. Select only <b>one</b> .								
	☐ Bachelor or higher degree in geology, engineering geology, geological engineering, or related geological science.									
	Required Attachment: Attach an official college or university transcript indicating successful completion.									
	In the absence of one of the aforementioned degrees, provide evidence of the satisfactory completion of 30 semester hours (or equivalent) of geological science courses including, but not limited to: Stratigraphy; Structural geology; Mineralogy; Paleontology; Petrology; Geomorphology; or Field Geology.*									
	* At least 12 semester hours must have been completed in four of the seven subjects listed above.  **Required Attachment: Attach an official school transcript indicating successful completion.									
12.	Have you completed seven (7) years of geological work that must include either a minimum of three (3) years of geological work under the supervision of a qualified or certified professional geologist or a minimum of three (3) years of experience in responsible charge of geological work?									
	No  Yes If yes, complete a <i>Geological Work Experience Log</i> and submit with this application.									
13.	Have you ever been subject to a disciplinary action taken by <u>any</u> (including Virginia) local, state or national regulatory body?									
	No									
	Yes If yes, provide a certified copy of the final order with lawful authority to issue such order, decrease.		cision by a court or reg	gulatory agency						
14.	<ul> <li>A. Have you ever been convicted in any jurisdiction of a be disclosed on this application. Do not disclose viola system.</li> <li>No</li></ul>	itions that were adjud								
	<ul> <li>B. Have you ever been convicted in any jurisdiction contendere must be disclosed on this application. Do the juvenile court system.</li> <li>No</li></ul>	not disclose violation	, , , ,							
	Yes  If yes, provide the information requeste	u III # 14.U.								

	Attach your original criminal history record a application (i.e., information on the status of in of rehabilitation; etc.). If necessary, you may a Original criminal history records may be obtained Virginia residents must obtain a complete criminal the Department of State Police, Central Criminal Recontacting your local State Police Division. Certifie	A. or #14.B., list the <b>felony</b> and/or <b>misdemeanor conviction(s)</b> and any other information you wish to have considered with this acarceration, parole or probation; reference letters; documentation attach a separate sheet of paper.  If by contacting the state police in the jurisdiction in which you were convicted history record from the Virginia State Police. You may obtain a request form from the cords Exchange, Post Office Box 27472, Midlothian, Virginia 23261-7472 or by ad copies of court records may be obtained by writing to the Clerk of the Court in didress is available from your local police department.				
		arces is available from your local poince department.				
15.	I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed an information that might affect the decision to approve this application. I certify that I will notify the Board if I am subject to any disciplinary action or convicted of a felony or misdemeanor (in any jurisdiction) prior to receiving the requested certificate. I certify that I have read, understood and complied with all the laws of Virginia under the provisions of Title 54.1, Chapter 22 of the Code of Virginia and the Virginia Board for Professional Soil Scientists, Wetland Professionals and Geologists Regulations for the Geology Certification Program.					
	Signature	Date				