



STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
BOARD OF PROFESSIONAL GEOLOGISTS
500 James Robertson Parkway, 3rd Floor
Nashville, TN 37243-1139
615-741-3611 Fax: 615-532-9410

LAW AND RULES

The Law and Rules can be accessed from the board's homepage. The registration law for geologists is found at *Tennessee Code Annotated*, Title 62, Chapter 36. You may also contact the board office to request a copy of the Law and Rules, which are subject to change. Before submitting this application, be sure you have met the minimum education experience, and examination* requirements for registration, because the application fee is **not refundable**.

*Exam requirement goes into effect January 1, 2009.

FEES

Please complete the application and attach a check or money order, made payable to the *Tennessee Board for Professional Geologists*, in the amount of \$115.00 (application fee of \$50.00 and registration fee of \$65.00), **which is non-fundable**.

Biennial Renewal of Certificate of Licensure – **\$100.00**

EDUCATION

All applicants applying for a Professional Geologist licensure must have graduated from an accredited geologic curriculum of four or more years approved by the board. *Certified* transcripts (per *Tennessee Code Annotated* 62-36-108) may be included with your application or sent directly to this office.

FORMS

1. APPLICATION

The application must be typewritten or LEGIBLY handwritten in blue or black ink, fully completed, signed notarized and accompanied by the requisite documents and fee(s) BEFORE it will be accepted for consideration by the board.

2. EMPLOYMENT VERIFICATION

Provide proof to the board of five years work experience (three years with a master's degree {per *Tennessee Code Annotated* 62-36-109(2)(A)}).

3. OUT OF STATE VERIFICATION

All reciprocal applicants must request that an Out of State Verification form be completed and returned directly to the Tennessee board by the reciprocal state.

BOARD CONTACT

If you have questions about any of this information or about your application, call Donna Moulder, at 615-741-3611, or send an e-mail: donna.moulder@state.tn.us



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APPLICATION FOR LICENSURE AS A PROFESSIONAL GEOLOGIST IN TENNESSEE

Instruction: This form must be written legibly in ink or typewritten. Your application must be accompanied by a check or money order in the amount of \$115.00 and made payable to the Tennessee Board of Professional Geologists. THIS FEE IS NON-REFUNDABLE.

How are you applying? Professional Geologist Reinstatement

1. Full Name: _____

2. Home Address: _____

City/State/Zip: _____

3. Business Name and Address: _____

City/State/Zip: _____

Check Preferred Mailing Address: Residence Business

5. Telephone Number: (Home) _____ (Work) _____

6. E-Mail Address: _____

7. Date of Birth: _____ SSN _____

8. Are you a citizen of the United States: _____ Yes _____ No

9. Have you ever held a registered professional geologist registration/license in Tennessee or elsewhere? _____ Yes _____ No If yes, indicate below: (if more space is needed, attach a separate statement).

TYPE OF LICENSE AND STATE OF LICENSURE	LICENSE NUMBER	DATE ISSUED	EXPIRATION DATE
1.			
2.			
3.			
4.			

10. Are you applying for a license in accordance to a reciprocal agreement with another state?

11. Have you ever been denied a professional or occupational license in this state or any other state or jurisdiction? _____ (If yes, attach a separate statement giving complete details.)

12. Have you ever had a professional or occupational license denied, suspended, revoked, surrendered or have you ever been disciplined by the licensing authorities in this or any other state or jurisdiction? _____ (If yes, attach a separate statement giving complete details.)

13. Have you ever had any other business, professional or occupational license of any type denied, suspended, revoked or surrendered in this or any other state or jurisdiction? _____ If yes, attach a separate statement giving complete details.)

14. Have you ever been convicted of any felony criminal offense or crime of moral turpitude or is there any criminal charge now pending against you? _____ If yes, attach a separate statement giving complete details.)

15. Include in chronological order attendance at each college or university beyond high school. DO NOT INCLUDE SHORT COURSES OR SEMINARS.

Name and Location of Institute	Attendance		Degree Received	Major	Date of Degree
	From	To			
1.					
2.					
3.					

PROFESSIONAL EXPERIENCE

List in chronological order your professional experience starting with the most recent position. Be brief but supply pertinent facts concerning the degree of responsibility and nature of the geological decisions you have made. Additional sheets may be used if necessary.

Position Number _____	Position Title _____
Dates of Employment: _____ to _____	
Employer Name _____	
Employer Address _____	
Name of Your Immediate Supervisor _____	
Is Supervisor a licensed professional geologist? _____ License # _____	
DESCRIBE YOUR MAJOR DUTIES/JOB RESPONSIBILITIES BELOW	

Total Number of Months	

Position Number _____	Position Title _____
Dates of Employment: _____ to _____	
Employer Name _____	
Employer Address _____	
Name of Your Immediate Supervisor _____	
Is Supervisor a licensed professional geologist? _____ License # _____	
DESCRIBE YOUR MAJOR DUTIES/JOB RESPONSIBILITIES BELOW	

Total Number of Months	

Position Number _____ Position Title _____

Dates of Employment: _____ to _____

Employer Name _____

Employer Address _____

Name of Your Immediate Supervisor _____

Is Supervisor a licensed professional geologist? _____ License # _____

DESCRIBE YOUR MAJOR DUTIES/JOB RESPONSIBILITIES BELOW

Total Number of Months

Position Number _____ Position Title _____

Dates of Employment: _____ to _____

Employer Name _____

Employer Address _____

Name of Your Immediate Supervisor _____

Is Supervisor a licensed professional geologist? _____ License # _____

DESCRIBE YOUR MAJOR DUTIES/JOB RESPONSIBILITIES BELOW

Total Number of Months

16. Have you read and understand the Tennessee Geologist Law and the Rules and Regulations of the Board? _____

ALL INFORMATION IN THIS DOCUMENT IS A PUBLIC RECORD SUBJECT TO DISCLOSURE PURSUANT TO THE TENNESSEE FREEDOM OF INFORMATION ACT, EXCEPT ITEMS DESIGNATED WITH THIS SYMBOL (*).

This affidavit is to be executed by applicant before a notary public:

The undersigned, in making this application to the Tennessee Board of Professional Geologists, swears (of affirms) that he/she is the applicant named herein and that the answers and information contained herein are true to best of his/her knowledge and belief.

Print Name of Applicant

Applicant's Signature

Date

Sworn and subscribed to before me this _____ day of
_____, 20 _____.

Notary Public

My Commission Expires: _____



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EMPLOYMENT VERIFICATION

TO BE COMPLETED BY APPLICANT:

Name: _____

Social Security Number: _____

TO BE COMPLETED BY EMPLOYER:

1. Name of Firm: _____

Business Mailing Address: _____

Business Phone: _____ Fax: _____

Email Address: _____

2. Immediate Supervisor of Applicant: _____

Title of Immediate Supervisor: _____

Are you a licensed geologist? _____

If Licensed Geologist: License Number: _____

State of Licensure: _____

3. Job Title(s) of Applicant: _____

(Attach a separate sheet if additional space is needed)

4. Describe type of work performed: _____

5. Principle Business of Firm: _____
6. Average Hours Worked Per Week: _____
7. Total Years Worked: _____ Full Time: _____ Part Time: _____
8. Employment Date: From: _____ To: _____
mm/dd/yyyy mm/dd/yyyy

Print Name of Individual Completing Form

Title

Signature of Individual Completing Form

Date

Telephone

Please submit this form to: Tennessee Board of Professional Geologists
500 James Robertson Parkway, 3rd Floor
Nashville, TN 37243-1139

- () National examination:
 - () Fundamentals of Geology
 - () Principles & Practices of Geology
- () Education _____ years; and experience of _____ years
- () Comity/Reciprocity with _____
(state)
- () Grandfather clause in our law
- () Other (please explain)

Date: _____

Signed: _____

Title: _____

Address: _____

(seal)

Telephone: _____

PLEASE SUBMIT THIS TO THE TENNESSEE BOARD OFFICE AT THE ABOVE ADDRESS

April 2008



STATE OF TENNESSEE
 Board of Professional Geologists
 500 James Robertson Parkway
 Nashville, TN 37243-1139
 615-741-3611
 Fax : 615-741-1245

VERIFICATION OF EXAMINATIONS AND/OR LICENSURE FOR GEOLOGISTS

NOTE TO APPLICANTS: If you are NOT licensed to practice geology in another state, you may disregard this form.

TO:	FROM: Tennessee Board of Professional Geologists 500 James Robertson Parkway Nashville, TN 37243-1139
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APPLICANTS: COMPLETE SECTION I of this form and forward it to the state board or regulatory agency verifying your licensure or exams. If you took exams in more than one state, you should request verification from each state maintaining exam records for you. You may photocopy this form if necessary. The verifying agency will send this completed form directly to our office. It may be helpful if you would include an envelope addressed to our office using the address listed at the top of this form.

VERIFYING AGENCY: COMPLETE SECTION II for exams or licensure held in your jurisdiction by the individual referenced in Section I. Return the form directly to the Tennessee Board using the address or fax number listed at the top of this form. You may also email the form to donna.moulder@tn.gov

SECTION I – APPLICANTS

Name	Type of License	Daytime Telephone Number
Address	License Number	I hereby request written release of related examination records to the State of Tennessee
City, State, Zip	Social Security Number	
		Sign & Date

SECTION II – VERIFYING AGENCY

License held in your State	License Number	Date Issued	Expiration Date
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	Hours	ASBOG (Yes or No)	Results	Exam Date
Fundamentals of Geology				
Principles of Geology				
Fundamentals of Geology exam accepted from				
Comity				

Has this applicant been subject to any disciplinary action or pending legal action that could affect his professional status in this state? (if yes, please attach an explanation.) YES NO

I CERTIFY THAT THE INFORMATION CONTAINED HERE IN TRUE AND CORRECT ACCORDING TO THE OFFICIAL RECORDS OF THIS STATE.

State _____

Signature/Title _____

board seal

Date	Telephone Number
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