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	PENNSYLVANIA		FOR OFFICE USE ONLY				
CRE ENTIAL E			BATES NUMBER				
	NGINEERING & SURVEYING EX/	AMINATION BOARD	AMOUNT PAID INITIALS				
SERVICES, INC. SCHE	DULING FORM PA11 FOR LANE) SURVEYORS					
Read the Candidate Information Bulletin (available at <u>www.pcshq.com</u>) before completing this form. Record the information requested in ink or with a typewriter. Make a check mark where appropriate; abbreviate as necessary.							
1. EXAM DATE:	April	October					
	(Entry Deadline is Dec. 1)	(Entry Deadline is	luly 1)				
2. EXAM (check all that apply):	Fundamentals of Surveying (FS)	\$200					
	Principles & Practice of Surveying (PS) \$265					
	Surveying - State Exam	\$175					
4. DATE OF BIRTH / MONTH / 5. NAME:							
FIRST	MIDDLE		LAST				
MAIDEN/PREVIOUS		_ Title (check one) □ Mr.	☐ Mrs. ☐ Ms. ☐ Miss				
CITY	STATEZIP	 CODE + 4 FOF	EIGN POSTAL CODE				
	EMAIL						
DAYTIME TELEPHONE NUMBER	EVENING TELEPHONE NUMBER	FAX NUMBER					

PLEASE NOTE: NCEES registration may open *after* the Pennsylvania Scheduling Form PA11 deadline. Therefore, all candidates who have not completed NCEES registration prior to the scheduling deadline (*except for Reciprocity candidates*), please register with NCEES online at www.ncees.org. It is not mandatory for Reciprocity candidates to complete NCEES registration.

SCHEDULING FORM PA11 FOR LAND SURVEYORS (page 2 of 2)

7. EXAMINATION LOCATION REQUEST (check one)

Harrisburg	Philadelphia	Pittsburgh	🗌 Altoona
_ 0	—	_ 0	

Erie (April only)

Allentown (April only)

State College (April only)

8. QUESTIONS: The following must be answered. If any of the answers are "YES", please attach a full explanation on an 8 1/2" x 11" sheet of paper and submit a certified copy of all relevant court and/or legal documents. Answering "YES" to any of the following questions will not result in the automatic denial of your application.

A. Have you been convicted, found guilty or pleaded nolo contendere, or received probation without verdict or accelerated rehabilitative disposition (ARD) as to any felony or misdemeanor, including any drug law violations, or do you have any criminal charges pending and unresolved in any state or jurisdiction? You are not required to disclose any ARD or other criminal matter that has been expunged by order of a court.	☐ Yes	🗌 No
B. Have you ever been disciplined (e.g., revocation, suspension, fine, reprimand) by an occupational icensing or certification board or commission in Pennsylvania or any other state?	🗌 Yes	🗌 No
C. Are there any disciplinary charges now pending against you by an occupational licensing or certification board or commission in Pennsylvania or any other state?	🗌 Yes	🗌 No
D. Have you ever withdrawn an application, had an application denied or refused, or agreed not to reapply for a license, certification or registration in another state, territory or country ?	🗌 Yes	🗌 No

9. SPECIAL ACCOMMODATIONS: If you require special accommodations please check the appropriate box.

Special accommodations due to disability

In accordance with the provisions of the Americans with Disabilities Act (ADA), examination administration modifications are available for candidates who qualify. Such candidates must apply for accommodations with NCEES. Please visit their website for deadlines and more information: <u>www.ncees.org</u>.

☐ Sabbath accommodations

Candidates who are members of religious faiths that cannot take the examination on the designated date are permitted to take the examination on an assigned alternate date and time. Such candidates must apply for accommodations with NCEES. Please visit their website for deadlines and more information: <u>www.ncees.org</u>.

10. AFFIDAVIT: Applicant must read the following paragraph and sign the application form attesting to the following: I certify that the statements in this application are true and correct to the best of my knowledge, information and belief; and that I am of good moral character. I verify that this form is in the original format as supplied Professional Credential Services and has not been altered or otherwise modified in any way. I understand that any false statement made is subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities and may result in the suspension or revocation of my license or certificate. I understand that it is my responsibility to provide all of the required information and documentation by the deadline. Failure to do so will make me ineligible for this examination. I understand that every attempt will be made to seat me at the test site I have selected. I also understand that site selection cannot be guaranteed and that I will be admitted only to the test site for which I have been scheduled by Professional Credential Services. I understand that fees are subject to change. I understand that the money that I have paid for the exam date I have selected on this form will not be transferred to future exam dates. I agree that in the event my examination papers are lost, or if the examination is not held for any reason, any claim I may have will be limited to the examination fee paid by me. I further understand that submission of this form acknowledges that I understand and agree to all provisions contained in this form.

Applicant Signature

Date

(October only)

Mail completed scheduling form and fee, received no later than the entry deadline, to:

Professional Credential Services/PA ENG P.O. Box 198728 Nashville TN 37219 toll-free (877) ENG-EXAM