

OREGON STATE BOARD OF GEOLOGIST EXAMINERS
EMPLOYMENT VERIFICATION FORM (Page 1 of 2)

TO: _____
Supervisor

FROM: _____
Applicant

ADDRESS: _____

ADDRESS: _____

PHONE NUMBER: _____

PHONE NUMBER: _____

I _____ am applying to the Oregon State Board of Geologist Examiners for registration as a:
(Name of Applicant for Registration)

Certified Engineering Geologist

Please verify my employment so the Board may evaluate my eligibility for registration. Return this completed VERIFICATION OF EMPLOYMENT form to me *in a sealed envelope* at my address listed above. I will return the verification form, unopened, to the Board of Geologist Examiners in one compiled application packet. Your prompt return of this form will assist me in meeting the Board's application deadline. Thank you for your assistance.

Applicant's Signature _____

The following portion of this form is to be completed by the applicant's supervisor. If the applicant is self-employed, a client or colleague may verify employment.

Supervisor's Name (please print): _____

Supervisor's Oregon CEG# _____ Other State _____ CEG/LEG# _____

*If the Supervisor is not a Certified Engineering Geologist (CEG) in Oregon or another state, please describe your engineering geologic experience and your qualifications to mentor engineering geologists on a separate piece of paper.

Name of Firm (at applicant's time of employment): _____

The applicant was under my supervision at this firm on the following dates?

From: _____ To: _____
Month/Year Month/Year

[] Full Time [] Part Time: Average Hours Worked Per Week _____ Applicant's Position: _____

Please describe applicant's engineering geologic duties and responsibilities: (be specific): _____

OREGON STATE BOARD OF GEOLOGIST EXAMINERS

EMPLOYMENT VERIFICATION FORM (Page 2 of 2)

Were the primary duties of the applicant engineering geologic related work (i.e. work in which engineering geologic knowledge and understanding was required)? _____

If NO, what percentage of work was engineering geologic related? _____ (%)

From your personal knowledge, indicate your opinion of the applicant's potential to practice Engineering Geology in Oregon by placing an 'X' in the appropriate boxes below.

	SATISFACTORY	UNSATISFACTORY	UNKNOWN
Geologic Hazards Mitigation			
Earth/Structure Interactions			
Soil and Rock Mechanics			
Geotechnical Analysis and Design			
Professional Integrity			
Professional Judgment			

*If the "unsatisfactory" box is checked, please provide an explanation below or on a separate piece of paper.

In your opinion, is the applicant qualified to practice Engineering Geology independently in Oregon:

Yes No Unsure, do not have information about the applicant's current qualifications

*If you answered "No", please provide an explanation below or on a separate piece of paper.

Additional comments (optional): _____

Place CEG
Stamp Below

Signature of Applicant's Supervisor

Date

Email Address _____