

Date Received:	_____
Fee Paid:	_____
Registration #:	_____
Date Issued:	_____

For Official Use Only

**KENTUCKY BOARD OF REGISTRATION FOR PROFESSIONAL GEOLOGISTS**  
**500 Mero Street, 2SC32**  
**Frankfort, KY 40601**

**Application for Registration as Professional Geologist**

**SECTION A – APPLICANT INFORMATION**

Name: \_\_\_\_\_  
 (This is the way your name will appear on your certificate)

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ County: \_\_\_\_\_

Home telephone number: \_\_\_\_\_

Personal e-mail address: \_\_\_\_\_

Social Security Number (last four digits): \_\_\_\_\_

Date of birth: \_\_\_\_\_

**SECTION B – EMPLOYMENT INFORMATION**

Present place of employment: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ County: \_\_\_\_\_

Business telephone number: \_\_\_\_\_

Business e-mail address: \_\_\_\_\_

Title or Position: \_\_\_\_\_

What is your current primary employment setting? (check one):

☐ Government Agency      ☐ Private Industry or Business (single employer)      ☐ Consulting  
☐ Academic Institution      ☐ Other - please explain: \_\_\_\_\_

What is your current primary area of practice? (check one):

☐ Environmental Geology/Hydrogeology      ☐ Engineering Geology/Geotechnical  
☐ Mineral Resources (Coal)      ☐ Mineral Resources (Oil and Gas)  
☐ Other - please explain: \_\_\_\_\_

## SECTION C – EDUCATION INFORMATION

College/University Name and Location	Dates Attended (To – From)	Date of Graduation (Month, Year)	Semester Hours of Geology	Degrees Received

## SECTION D – EXAMINATION INFORMATION

Have you successfully passed either portion of the National Association of State Board's of Geology (ASBOG) Exam?  
(Choose one) ☐ Yes ☐ No

Fundamentals of Geology (FG) Date \_\_\_\_\_ Score \_\_\_\_\_

Practice of Geology (PG)      Date \_\_\_\_\_      Score \_\_\_\_\_

## SECTION E- EMPLOYMENT HISTORY

Please provide a listing of your qualifying experience in the practice of geology beginning with the most recent position first. Attach a copy of a job description for each position listed and a letter from the supervisor verifying the time, dates, and nature of the experience.

[illegible]

## SECTION F – REGISTRATION AND LICENSURE HISTORY

(1) Do you now, or have you ever, held a state certification, licensure, or registration to practice geology?

(Choose one) ☐ Yes ☐ No

(2) Have you ever been refused certification, licensure, registration or the renewal thereof?

(Choose one) ☐ Yes ☐ No

(3) Have you ever had a certification, license, or registration to practice Geology or any other profession revoked, suspended or otherwise acted against in a disciplinary proceeding?

(Choose one) ☐ Yes ☐ No

If you answered "Yes" to Question 1, complete the chart below and include a photocopy of each certification, license, or registration ever held. If you answered "Yes" to either Question 2 or Question 3, you must provide details as to the state, agency, or organization's certificate, license, or registration number, date, and state reason for action on a supplemental sheet.

All 50 states, plus Washington, D.C., and non-USA are listed below. For each state, including Kentucky, in which you are currently, or in the past have been, registered/certified/licensed as a professional geologist, please provide the following information: Year of Registration, Certification, or Licensure (include number and how). G = grandfathered, or exam waived; E= exam passed; R= reciprocity; or O= other. Leave other states blank.

STATE	YEAR	REG. NO.	HOW (G/E/O/R)	STATE	YEAR	REG NO.	HOW (G/E/O/R)
AL				NE			
AK				NV			
AZ				NH			
AR				NJ			
CA				NM			
CO				NC			
CT				NY			
DE				ND			
FL				OH			
GA				OK			
HI				OR			
ID				PA			
IL				RI			
IN				SC			
IA				SD			
KS				TN			
KY				TX			
LA				UT			
ME				VT			
MD				VA			
MA				WA			
MI				WV			
MN				WI			
MS				WY			
MO				WASH DC			
MT				NON-USA			

## SECTION G – LEGAL HISTORY

Complete the following and attach any required documentation.

Have you, or a partnership, or corporation of which you were a partner, officer, or director, ever been:

- (1) Convicted of a crime in any jurisdiction which directly relates to the practice of geology or the ability to practice geology? (Choose one) ☐ Yes ☐ No

If yes, list offense and provide details on a separate sheet of paper.

- (2) Indicted for, or convicted of, a felony in any jurisdiction? (Choose one) ☐ Yes ☐ No

If yes, provide details on a separate sheet of paper.

- (3) The subject of an investigation, injunction, fine, or penalty concerning any alleged consumer, investor, or securities fraud in any jurisdiction? (Choose one) ☐ Yes ☐ No

If yes, provide details on a separate sheet of paper.

- (4) A defendant in any jurisdiction in a civil action arising out of your practice of geology?

(Choose one) ☐ Yes ☐ No

If yes, provide details on a separate sheet of paper.

I do certify under penalty of law that the information contained herein is true, correct, and complete to the best of my knowledge and belief. I am aware that, should investigation at any time disclose any such misrepresentation or falsification, I could be subject to disciplinary action by the Board of Registration for Professional Geologists.

I agree to fully cooperate in the processing of my application. I will furnish any additional information requested. I hereby grant permission to contact listed references, supervisors, or others who, in the judgment of the Board, may provide information concerning my qualification for registration, and to divulge information contained in the application of obtained in the evaluation of my qualifications, which is necessary to independently verify my qualifications.

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date Signed)

BEFORE ME, the undersigned authority, on this day personally appeared \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that s/he executed the same as a warrant of the statements therein contained, of his/her own free will.

Given under my hand and seal of office the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires \_\_\_\_\_

\_\_\_\_\_  
Notary Public

### INSTRUCTIONS

1. *Attach additional pages as necessary to complete this form fully.*
2. *Your application must be accompanied by a check, made payable to the Kentucky State Treasurer for the nonrefundable amount prescribed in 201 KAR 31:010.*
3. *If you have passed the Association of State Boards of Geology (ASBOG) exam composed of the Fundamentals of Geology (FG) and the Practice of Geology (PG), please provide a copy of your examination results with your application.*
4. *This application must be accompanied by a copy of your official transcript. Unofficial transcripts issued to the student are not acceptable.*
5. *For all other registration requirements, please refer to KRS 322A.040 and 201 KAR 31:040.*