

Date: _____

For Office Use Only!

<input type="checkbox"/> New <input type="checkbox"/> Update

(Please complete entire form. This Bio-Data will replace previous form.)

BIO-DATA FOR PARTICIPANTS IN NCEES EXAMINATION PROGRAM

Name: Dr. Mr. Ms. Mrs. _____

First Middle Initial Last Suffix

Mail all correspondence to: **Business Address** **Home Address**

Check Only One

Preferred Method of Contact: Mail E-mail Business phone Cell Phone Home Phone

Business Address Home Address

Nickname: _____
Date of Birth: _____

Business: _____
Street: _____
City: _____ State: _____ ZIP: _____

Street: _____
City: _____ State: _____ ZIP: _____

NOTE: Must have an alternate address if using PO Box

() _____ **Ext**
Business Telephone

() _____
Residence Telephone

() _____
Fax Number

_____ @ _____
E-mail Address

() _____
Cell Number

_____ @ _____
Alternate E-mail Address

Emergency Contact (Name & Number)

Degree(s) Attained:
(Please start with most recent degree)

Degree: _____	Degree: _____	Degree: _____
Institution: _____	Institution: _____	Institution: _____
Date: _____	Date: _____	Date: _____
Dept. or Discipline: _____	Dept. or Discipline: _____	Dept. or Discipline: _____

Professional License(s): (Please list state and number)

Licensed P.E. Lic.# _____ State _____

Licensed S.E. Lic.# _____ State _____

Licensed P.L.S. Lic.# _____ State _____

Licensed L.S. Lic.# _____ State _____

Licensed P.S. Lic.# _____ State _____

Area of Practice:

- Consulting
- Education
- Government
- Industry
- Private Practice
- Other (specify): _____

Languages Spoken:
(other than English)

**National, Professional, or
Technical Society Membership(s):**
(Please Abbreviate National Organizations)

Please complete Area of Expertise on Back

FE and LS Areas of Expertise (Check boxes that best describe your area(s) of expertise.)

Fundamentals of Engineering <input type="checkbox"/> FE Chemical <input type="checkbox"/> FE Civil <input type="checkbox"/> FE Electrical <input type="checkbox"/> FE Environmental <input type="checkbox"/> FE Industrial <input type="checkbox"/> FE Other Disciplines Specify _____ <input type="checkbox"/> FE Mechanical		Surveying <input type="checkbox"/> Land Planning <input type="checkbox"/> Boundary Surveys <input type="checkbox"/> Control Surveys <input type="checkbox"/> GPS <input type="checkbox"/> GIS <input type="checkbox"/> Photogrammetry <input type="checkbox"/> Geodetic Surveys <input type="checkbox"/> Topographic Surveys <input type="checkbox"/> Other _____	
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PE Areas of Expertise -PE GROUP I & Group II (Check boxes that best describe your area(s) of expertise.)

Structural I and Structural II <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Pre-stressed Concrete <input type="checkbox"/> Timber <input type="checkbox"/> Masonry <input type="checkbox"/> Structural Steel <input type="checkbox"/> Bridge Design <input type="checkbox"/> Foundations & Retaining Structures <input type="checkbox"/> IBC <input type="checkbox"/> ASCE 7 <input type="checkbox"/> AASHTO <input type="checkbox"/> High Seismic Design <input type="checkbox"/> Other _____		
Chemical <input type="checkbox"/> Mass/Energy Balances & Thermodynamics <input type="checkbox"/> Fluids <input type="checkbox"/> Heat Transfer <input type="checkbox"/> Mass Transfer <input type="checkbox"/> Kinetics <input type="checkbox"/> Plant Design and Operation <input type="checkbox"/> Other _____	Agricultural <input type="checkbox"/> Processing of Biological Products <input type="checkbox"/> Soil and Water <input type="checkbox"/> Structures and Environment <input type="checkbox"/> Biological Systems <input type="checkbox"/> Power and Machinery <input type="checkbox"/> Other _____	Metallurgical/Materials <input type="checkbox"/> Material Selection <input type="checkbox"/> Failure Analysis <input type="checkbox"/> Material Characterization/Processing <input type="checkbox"/> Fabrication & Mechanical Processing <input type="checkbox"/> Other _____
Civil <input type="checkbox"/> Transportation <input type="checkbox"/> Structural <input type="checkbox"/> Water Resources <input type="checkbox"/> Environmental <input type="checkbox"/> Geotechnical <input type="checkbox"/> Construction Engineering <input type="checkbox"/> Other _____	Architectoral <input type="checkbox"/> Mechanical Systems within Buildings <input type="checkbox"/> Electrical Systems within Buildings <input type="checkbox"/> Structural Systems within Buildings <input type="checkbox"/> Building Systems Integration <input type="checkbox"/> Project Management & Construction Admin <input type="checkbox"/> Other _____	Mining and Mineral Processing <input type="checkbox"/> Exploration <input type="checkbox"/> Mine Planning/Operations <input type="checkbox"/> Mineral Processing <input type="checkbox"/> Environment & Reclamation <input type="checkbox"/> Other _____
Electrical <input type="checkbox"/> Computers <input type="checkbox"/> Electrical and Electronics <input type="checkbox"/> Power <input type="checkbox"/> Other _____	Control Systems <input type="checkbox"/> Measurement <input type="checkbox"/> Signals & Transmission <input type="checkbox"/> Final Control Elements <input type="checkbox"/> Control Systems Analysis <input type="checkbox"/> Control Systems Implementation <input type="checkbox"/> Other _____	Nuclear <input type="checkbox"/> Power Systems <input type="checkbox"/> Fuel and Waste Management <input type="checkbox"/> Radiation Protection/Shielding <input type="checkbox"/> Criticality/Kinetics/Neutronics <input type="checkbox"/> Nuclear Measurements & Instruments <input type="checkbox"/> Other _____
Environmental <input type="checkbox"/> Water/Wastewater/Stormwater <input type="checkbox"/> Air <input type="checkbox"/> Solid and Hazardous Waste <input type="checkbox"/> Environmental Assessments Remediation and Public Health/Safety <input type="checkbox"/> Other _____	Fire Protection <input type="checkbox"/> Fire Protection Analysis <input type="checkbox"/> Fire Protection Management <input type="checkbox"/> Fire Science & Human Behavior <input type="checkbox"/> Fire Protection Systems <input type="checkbox"/> Passive Building Systems <input type="checkbox"/> Other _____	Petroleum <input type="checkbox"/> Drilling <input type="checkbox"/> Reservoir <input type="checkbox"/> Production <input type="checkbox"/> Other _____
Mechanical <input type="checkbox"/> Mechanical Systems & Materials <input type="checkbox"/> HVAC/Refrigeration <input type="checkbox"/> Thermal Fluid Systems <input type="checkbox"/> Other _____	Industrial <input type="checkbox"/> Ergonomics and Safety <input type="checkbox"/> Facilities Engineering & Planning <input type="checkbox"/> Systems Analysis and Design Logistics <input type="checkbox"/> Quality Engineering <input type="checkbox"/> Work Design <input type="checkbox"/> Other _____	Naval Architecture and Marine <input type="checkbox"/> Naval Architecture <input type="checkbox"/> Marine Mechanical <input type="checkbox"/> Marine Electrical <input type="checkbox"/> Other _____