

STATE OF CONNECTICUT  
 DEPARTMENT OF CONSUMER PROTECTION  
 OCCUPATIONAL & PROFESSIONAL LICENSING DIVISION  
 Telephone: (860) 713-6135 Website: [www.ct.gov/dcp](http://www.ct.gov/dcp)  
 Email: [dcp.occupationalprofessional@ct.gov](mailto:dcp.occupationalprofessional@ct.gov)



For Official Use Only

### APPLY ONLINE

For your convenience, we allow credit card payments.  
 Start yours at: [www.ct.gov/dcp/apply](http://www.ct.gov/dcp/apply)

## APPLICATION FOR ENGINEER-IN-TRAINING

### INSTRUCTIONS:

This form must be completed by the individual applying for certification. All spaces must be completed - please print in black ink or type. This application **must be accompanied by a check or money order in the amount of \$76.00**, made payable to: "Treasurer, State of Connecticut." **Application fees are non-refundable.**

**Important:** Note specific Regulatory and Department requirements included on this application.

→ Return your completed application and fee to:

Department of Consumer Protection, License Services Division, 450 Columbus Blvd, Ste 801, Hartford, CT 06103

### PRIMARY EMAIL ADDRESS

Please list the primary email address to be used for all communication regarding this document, such as approval, rejection, and renewal notification:

### Applicant Data:

First Name:		Middle Initial	Last Name
Residence Address: (No. & Street, State, Zip Code)			Home Telephone No.:
Business Address: (No. & Street, State, Zip Code)			Work Telephone No.:
Social Security No.*:	Date of Birth: / /	Address for Correspondence: <input type="checkbox"/> Business <input type="checkbox"/> Residence	

Have you ever been convicted of a felony crime?  YES  NO

If "Yes" please attach a notarized statement including the date(s) of the conviction(s), the court(s) where the case(s) were decided and a description of the circumstances involved.

**I hereby apply for a certification as Engineer-In-Training in the following class and method:**

- Class 9 – Graduate from an accredited degree program
- Class 9 – Foreign undergraduate degree with U.S. postgraduate degree
- Class 10 – Graduate of an accredited technology degree & 2 years of engineering experience following degree
- Class 10 – Foreign undergraduate degree; requires evaluation by NCEES

\* The Federal Privacy Act of 1974 requires that you be notified that disclosure of your Social Security Number is required pursuant to C.G.S. §17b-137a. If you choose not to disclose your Social Security Number your application can not be processed.

Are you currently registered, or licensed, or certified in any State or Country? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If "Yes" please provide registration/license information for the State or Country where you were originally licensed (attach additional sheet if necessary):			
Occupation	Certificate (if applicable)	Hrs. of Written Exam	Date Issued
As an Engineer-In-Training			

<p>Have you ever been refused by any state or territory of the U.S. a license as a Professional Engineer, Land Surveyor, Engineer-In-Training or Land Surveyor-In-Training, or have you ever held such license which has lapsed, been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If "Yes" please explain:</p>
<p>Have you ever applied for license in Connecticut? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If "Yes" please provide previous license number and date issued:</p>

<b>Education</b>			
Nature and extent of your education in (A) High or Preparatory School; (B) College or University; (C&D) Graduate School. A Foreign undergraduate degree must be evaluated by NCEES ( <a href="http://www.ncees.org">www.ncees.org</a> ).			
Name and Address of School	Years Attended (from-to)	Date of Graduation	Courses Completed and Degree Conferred
A.			
B.			
C.			
D.			

**Additional Required forms/documentation**

**Verification of Education** - Must be completed and certified by your school.

**Experience Record** – The additional form must be completed by applicants filing under Class 10.

**Personal Signatures of Endorsers**- **List 3 references; no signatures required under Class 9; five signatures required under Class 10**

**Picture** – Affix passport-type photo of approx.. 2¼” x 2¼” in size showing full front view in plain, light background taken within six months of date submitted. Front of photo must bear the signature of applicant and be taped securely on edges with clear tape.

**PERSONAL AFFIDAVIT**

The undersigned being duly sworn, upon his oath deposes and says that all information contained in this application to the best of his/her knowledge and belief are true and made in good faith.

If applying for licensure by reciprocity, I hereby certify that I have not been licensed, practiced, offered to practice, or signed any contracts for the practice of landscape architecture in the State of Connecticut, nor have I furnished services or signed any contracts for projects to be constructed in the State of Connecticut.

Signature of Applicant	Signature – Notary Public
Date	Date