



South Carolina Department of Labor, Licensing and Regulation
**South Carolina State Board of Registration for
Professional Engineers and Surveyors**
110 Centerview Dr. • Columbia • SC • 29210 (**overnight**)
P.O. Box 11597 • Columbia • SC 29211-1597 (**mailing**)
Phone: 803-896-4422 • Contact.ENGLS@llr.sc.gov • Fax: 803-704-6772
www.llr.sc.gov/eng

Instructions for Application for Admittance to the Principles and Practice of Surveying (PS) Examination

NOTE

This application should be completed **IF** you have met the educational requirements for licensure **AND** have passed the Fundamentals of Surveying (FS) Examination. The Board may allow early admittance to the PS examination prior to completing four (4) years of progressive practical experience under a practicing registered Land Surveyor. *The early exam option does **NOT** apply to the State Specific Examination.*

PS APPLICATION DEADLINES:

December 15 for the April exam
June 15 for the October exam

EDUCATION

Official transcripts must be on file with the Board office. It is the responsibility of the applicant to obtain the necessary documents. All transcripts from colleges and universities in the United States showing courses taken, degree(s) awarded, and date(s) of degree(s) must arrive at the Board Office in an envelope sealed and stamped by the Registrar. Education will be evaluated by the Board Education Consultant upon receipt of the completed application.

Applicants must have graduated from a school or college of four or more years with a board-approved degree, an ABET commission accredited curriculum in a related field, or a substantially equivalent program, including not less than twelve (12) semester hours or the equivalent in quarter hours of discipline-specific courses satisfactory to the board in each of the disciplines described in Section 40-22-20(26) for which the applicant is requesting licensure.

FS EXAM VERIFICATION

If the Fundamentals of Surveying (FS) examination was taken by computer-based testing (CBT), the South Carolina Board will verify the exam results through NCEES. If the FS Exam was taken in another jurisdiction ***prior*** to CBT, it will be the applicant's responsibility to obtain verification of the examination. Verification of examination will be accepted on either the Board-approved form or one generated by another jurisdiction.

FEE

No application fee is required. Examination fees are determined by and should be paid to NCEES. Once approved by the Board, you will receive instructions to register and pay for the examination through NCEES.

RE-EXAMINATION

Repeat candidates for an examination should e-mail the Board at contact.engls@llr.sc.gov for approval to retake an examination. Please include a full name, date of birth, the last four digits of the social security number, and current mailing address to ensure proper enrollment. Applicants failing the same topical examination two times shall complete a Certificate of Study Form to provide evidence that steps have been taken in preparation for a third examination. The Certificate of Study form is available online at http://www.llronline.com/POL/Engineers/Applications/Certificate_Of_Study.pdf. A new application is required after the third failure.

After passing the PS examination AND obtaining qualifying experience, applicants may apply for licensure as a professional surveyor. Upon approval of the experience, applicants will be required to take and pass the State-Specific Examination to be considered for licensure.



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Application for Admittance to Principles and Practice of Surveying (PS) Examination

(Prior to completing four years of work experience)

Include with your application:

- Copy of driver's license, state issued photo ID, passport or military ID
- Copy of social security card

PERSONAL INFORMATION

Date: _____

Full Name: _____

Home Address: _____ County: _____
(Street, City, State and Zip Code)

Mailing Address: _____
(If different than above)

Social Security Number: _____ Date of Birth: _____

Telephone Number: _____ Email: _____

Race: (for statistical purposes only): _____ Gender: ☐ Female ☐ Male

Have you taken and passed the Fundamentals of Surveying (FS) Exam? ☐ YES ☐ NO

State: _____ Date: _____

Have you taken the Principles and Practice of Surveying (PS) Exam? ☐ YES ☐ NO

State: _____ Date: _____

EDUCATION

Please list all undergraduate and graduate studies. Official transcripts are required and must arrive in an envelope sealed by the Registrar's Office; you can include with application or have Registrar's Office mail directly to this Board.

School/College/University Location	Dates of Attendance (mth/day/yr to mth/day/yr)	Date or expected date of graduation	Degree received or expected (i.e. BSCE)

PRIVACY DISCLOSURE

South Carolina Law requires that every individual who applies for an occupational or professional license provide a social security number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databanks established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.

Other personal information collected by the Department for the licensing boards it administers is limited to such personal information as is necessary to fulfill a legitimate public purpose. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on the application may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act, and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical services.

ATTESTATION AND SIGNATURE

I, _____, am the person described and identified and the person named in all documents presented in support of this application. I certify that I have never been convicted of violating any Federal, State, Municipal or other law, statute or ordinance, other than as disclosed as required within this application.

I certify that all statements contained herein are true and correct to the best of my knowledge. I further understand that false and incorrect information provided by me may result in the cancellation of any license issued pursuant to this application.

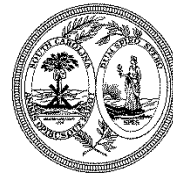
I understand that passing the Principles and Practice of Surveying (PS) examination does not automatically qualify me for the licensure in South Carolina. In order to be considered for licensure, all qualifications of S.C. Code of Laws, Section 40-22-225 must be satisfied.

Signature of Applicant

Date



STATE OF SOUTH CAROLINA
DEPARTMENT OF LABOR, LICENSING AND REGULATION
VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES
AFFIDAVIT OF ELIGIBILITY



Pursuant to Section 8-29-10, *et seq.* of the South Carolina Code of Laws (1976, as amended), the Department of Labor, Licensing and Regulation must verify that any person who applies for a South Carolina license is lawfully present in the United States. Complete and sign this affidavit of eligibility. The information provided is subject to verification.

Section A: LAWFUL PRESENCE in the United States.

The undersigned _____, of _____
(Print clearly First, Middle, and Last name) (Home Address, City, State, and Zip Code)
being first duly sworn deposes and states as follows:

Check only one box:

1. ☐ I am a United States citizen; or
2. ☐ I am a Legal Permanent Resident of the United States eighteen years of age or older; or
3. ☐ I am a Qualified Alien or non-immigrant under the Federal Immigration and Nationality Act, Public Law 82-414, eighteen years of age or older, and lawfully present in the United States.
4. ☐ Other: _____ Please submit any documentation that supports this status.

Date of Birth: _____

Alien Number: _____ I-94 Number: _____

(If you checked number 2, 3, or 4 you must attach a copy of your immigration documents. See instruction sheet for a list of accepted immigration documents.)

Section B: ATTESTATION.

I understand that in accordance with section 8-29-10 of the South Carolina Code of Laws, a person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall, in addition to other sanctions imposed by this State or the United States, be guilty of a felony, and upon conviction must be fined and/or imprisoned for not more than 5 years (or both).

I understand that the representations made in this Affidavit shall apply through any license(s) or renewals issued, and that I shall have an affirmative duty to immediately advise the Department of Labor, Licensing and Regulation of any change of my immigration or citizenship status.

I swear and attest the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension, or revocation of a license, certificate, registration or permit.

Signature of Affiant

SWORN to before me this _____ day of _____, 20____

Notary Signature

Print Name

Notary Public for _____

My Commission _____

Expires: Rev: 02-21-2018

INSTRUCTION SHEET FOR COMPLETING AFFIDAVIT OF ELIGIBILITY

CHECK box 1:

If you are a United States Citizen by birth or naturalization

CHECK box 2:

If you are a Legal Permanent Resident and you are not a U.S. Citizen, but are residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

CHECK box 3:

If you are a Qualified Alien. You are a Qualified Alien if you are:

An alien who is lawfully admitted for residence under the INA.

An alien who is granted asylum under Section 208 of the INA.

A refugee who is admitted to the United States under Section 207 of the INA.

An alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year.

An alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3).

An alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

An alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980.

An alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

ACCEPTED IMMIGRATION DOCUMENTS:

Unexpired Reentry Permit (I-327)

Permanent Resident Card or Alien Registration Receipt Card With Photograph (I-551)

Unexpired Refugee Travel Document (I-571)

Unexpired Employment Authorization Card Which Contains a Photograph (I-766)

Machine Readable Immigrant Visa (with Temporary I-551 Language)

Temporary I-551 Stamp (on passport or I-94)

I-94 (Arrival/Departure Record) in Unexpired Foreign Passport

I-20 (Certificate of Eligibility for Nonimmigrant, F-1, Student Status)

DS2019 (Certificate of Eligibility for Exchange Visitor, J-1, Status)