REQUEST FOR VERIFICATION OF LICENSURE OR EXAMINATION – (F5)

IF a fee is required, please notify the applicant but do not delay return of this form.

FROM: The Guam Board of Registration for Professional Engineers, Architects & Land Surveyors

590 S. Marine Corps Drive
Suite 511
Tamuning, GU 96913

License/Certificate Held: 

NAME: 

ADDRESS: 

SS#: DOB: 

I. THE ABOVE NAMED PERSON WAS CERTIFIED OR LICENSED AS:

Certificate Number
Date Issued
Valid Until

- ENGINEER-INTERN
- PROFESSIONAL ENGINEER
- LAND SURVEYOR-INTERN
- PROFESSIONAL LAND SURVEYOR
- OTHER
- ARCHITECT
- LANDSCAPE ARCHITECT

II. BASIS OF LICENSURE

<table>
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<tr>
<th>WRITTEN EXAMINATION</th>
<th>Hours</th>
<th>Results</th>
<th>Discipline</th>
<th>Month &amp; Year Passed</th>
<th>Uniform NCEES, NCARB or CLARB exam?</th>
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<td>-Subjects-</td>
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1. ORAL EXAMINATION

2. FE/FLS ACCEPTED FROM:

3. PE/PLS ACCEPTED FROM:

4. EIT/LSIT ACCEPTED FROM:

5. OTHER:

III. QUESTIONS:

1. Has any disciplinary action ever been taken against the applicant? YES ☐ NO ☐

2. If yes, has this disciplinary case been satisfied to the Board’s requirements? YES ☐ NO ☐

If answer to either question is yes, please explain on separate 8 1/2” x 11” paper and attach.

IV. REMARKS:

Completed by: 

Title: 

(SEAL)

Telephone: (671) 646-8115 Fax: (671) 649-9533 Website: www.guam-peals.org