



STATE OF MISSOURI

BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS, PROFESSIONAL LAND SURVEYORS
AND PROFESSIONAL LANDSCAPE ARCHITECTS (APEPLSPLA)

**INSTRUCTIONS FOR COMPLETION OF AN APPLICATION FOR
RELICENSURE - PROFESSIONAL ENGINEER**

3605 MISSOURI BLVD., SUITE 380
JEFFERSON CITY, MO 65109
TELEPHONE: 573/751-0047
FAX: 573/751-8046
moapeplspla@pr.mo.gov
<https://pr.mo.gov/apelsla.asp>

This application is to be completed only if your license has "Expired". If you are in doubt regarding the status of your license, please call the Board office at (573) 751-0047.

All information requested on this application must be typewritten.

Your most recent four years of experience must be reported by completing the Experience Log.

If your license has been expired for a period of five years or longer, your experience must be verified by a supervising licensed engineer, supervisor or client.

Faxed, scanned or photocopies of experience logs are **NOT** acceptable.

In addition to the Summary Log of Professional Development Hours, attach a copy of documents supporting completion of the professional development hours required within the preceding two years of this application date.

Pursuant to Board Rule 20 CSR 2030-5.160, Applicants shall submit proof of receiving a passing score of 80% on the required State Exam covering Chapter 327, RSMo, the Board Rules and Ethics. To take this exam, please click here: <https://pr.mo.gov/apelsla-exam.asp>. In addition, proof of your passing score must be included with the application.

If you have served on full-time active duty in the military during the preceding two calendar years, you may apply for relicensure without completing the PDH requirement for the period during which you served; however, you must submit a copy of your active duty orders or discharge papers.

This application must be accompanied by a check or money order in the amount of \$200 made payable to the Missouri Board for Professional Engineers. Fees must be drawn on a United States bank. Per Board Rule 20 CSR 2030-6.010, fees are nonrefundable.

Completed relicensure applications are processed in the order of receipt in as timely a manner as possible. Processing time varies depending on the volume of applications awaiting review and other responsibilities of the Board office.

**STATE OF MISSOURI****BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS, PROFESSIONAL
LAND SURVEYORS, AND PROFESSIONAL LANDSCAPE ARCHITECTS (APEPLSPLA)
APPLICATION FOR RELICENSURE AS A PROFESSIONAL ENGINEER**

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ALL INFORMATION ON THIS SHEET MUST BE TYPEWRITTEN (FAXED, SCANNED OR PHOTOCOPIES ARE NOT ACCEPTABLE)		FOR APEPLSPLA USE ONLY
NAME		NUMBER
ADDRESS		
CITY, STATE, ZIP CODE		TELEPHONE NUMBER
E-MAIL ADDRESS - REQUIRED	LICENSE NUMBER	SOCIAL SECURITY NUMBER - REQUIRED
TO: MISSOURI BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS PROFESSIONAL LAND SURVEYORS AND PROFESSIONAL LANDSCAPE ARCHITECTS 3605 MISSOURI BLVD., SUITE 380 JEFFERSON CITY, MO 65109 I hereby apply for relicensure as a professional engineer under my original number _____, on the basis of information contained in my original application for license and on which my license was originally granted. Please check the appropriate box below: ☐ ACTIVE (I hereby certify that I have successfully completed 30 professional development hours within the preceding two years of this application date. Documentation verifying completion of the required PDHs is submitted.) ☐ INACTIVE (I hereby certify that I have not completed the required number of professional development hours within the preceding two years of this application date; therefore I am placing my license on an Inactive status.)		
Lawful Presence: Pursuant to 8 U.S.C.A §1621, an individual must be lawfully present in the United States in order to obtain a license from the Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects. If you are a United States citizen, please provide a copy of your birth certificate or U.S. passport. If you are not a United States citizen, you must be lawfully present pursuant to a visa or other authority of the United States, 8 U.S.C.A §1621 and provide a copy of the documentation allowing for your lawful presence.		
CITIZENSHIP ☐ United States ☐ Foreign	PROOF OF CITIZENSHIP (SELECT ONE) ☐ U.S. Birth Certificate ☐ U.S. Naturalization ☐ Passport ☐ Real ID FOREIGN CITIZENS PROOF OF LAWFUL RESIDENCY: ☐ F1 Student Visa ☐ H1B Visa ☐ Permanent Resident Card Expired - Extension Granted ☐ U.S. Permanent Resident Card ☐ Visa with stamped date of U.S. Entry (proof of lawful presence must be attached)	
RECORD OF CHARGES, CONVICTIONS AND FINES IMPOSED ON LICENSEE		YES
Have you been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of this or any other state or of the United States whether or not sentence was imposed including suspended imposition of sentence, suspended execution of sentence and misdemeanor charges that you have not previously disclosed to this Board? If "YES", please submit a copy of the charges, findings and order with this application.		☐
In any other licensing jurisdiction, have you been the subject of disciplinary action, or entered into any type of settlement agreement, providing for any limitation on your ability to practice, or monetary penalty or payment of costs that you have not previously disclosed to this Board? If "YES", please submit a copy of the charges, findings, and order with this application.		☐
PURSUANT TO SECTION 42.051, RSMo		YES
1. Have you ever served on active duty in the Armed Forces of the United States and separated from such service under conditions other than dishonorable?		☐
2. If yes, would you like to receive information and assistance regarding veterans benefits and services?		☐
3. If yes, may the agency share your contact information with the Missouri Veterans Commission to provide such information? General information may also be found at the Missouri Veterans Commission's website.		☐
Pursuant to Section 324.010, RSMo: ☐ CHECK THIS BOX ONLY IF IN ALL OF THE LAST THREE (3) YEARS: YOU WERE NOT A MISSOURI RESIDENT, YOU DID NOT HAVE ANY MISSOURI INCOME, AND YOU ARE NOT SUBJECT TO ANY TYPE OF MISSOURI INCOME TAX. <i>False statements are subject to criminal penalties and/or license discipline.</i> <i>If you have any questions regarding taxes contact the Department of Revenue at 573-751-7200 or e-mail income@dor.mo.gov.</i> I, the undersigned applicant for relicensure by the Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Professional Landscape Architects as a PROFESSIONAL ENGINEER, on my oath, or affirmation, and the purpose of securing such relicensure, declare that the statements and representations made in the foregoing application are true.		
SIGNATURE		DATE

**STATE OF MISSOURI**BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS, PROFESSIONAL LAND SURVEYORS
AND PROFESSIONAL LANDSCAPE ARCHITECTS (APEPLSPLA)**PROFESSIONAL ENGINEER RELICENSURE
EXPERIENCE LOG**

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THIS FORM MAY BE REPRODUCED

APPLICANT'S NAME	APPLICANT'S SIGNATURE	
EMPLOYER FOR THIS ENGAGEMENT (PLACE OF EMPLOYMENT)		EMPLOYER TELEPHONE NUMBER
EMPLOYER ADDRESS		

INSTRUCTIONS (ALL INFORMATION IN THIS SECTION MUST BE TYPEWRITTEN - FAXED, SCANNED OR PHOTOCOPIES ARE NOT ACCEPTABLE)

Your most recent four years of experience must be reported.

List the engagement (place of employment), dates of employment, title of position, character and description of your work and total amount of time. If you are a president or vice president of a firm or if you are self-employed, experience must be verified by at least **three** of your major clients. A separate experience log should be completed for each client.

Have a supervising licensed professional engineer, supervisor or client, complete verification below **ONLY** if your license has been expired for a period of five years or longer.

A **separate** sheet **must** be used for **each** engagement (place of employment) or client. If additional sheets are necessary, please have the appropriate supervising licensed professional engineers, supervisors or clients sign and date the attached sheets (if your license has been expired for a period of five years or longer.)

ENGAGEMENT NUMBER (PLACE OF EMPLOYMENT)	DATE		TITLE OF POSITION, NAME OF EMPLOYER, CHARACTER AND DESCRIPTION OF EACH ENGAGEMENT (PLACE OF EMPLOYMENT). State definitely the CHARACTER AND DESCRIPTION of your work. Any necessary amplifications may be made on extra sheets of paper attached to this sheet. You MUST state clearly what you did.	TIME TOTAL NUMBER OF YEARS AND MONTHS AT THIS ENGAGEMENT (PLACE OF EMPLOYMENT)
	FROM MO/YR	TO MO/YR		

VERIFICATION OF SUPERVISING LICENSED PROFESSIONAL ENGINEER, SUPERVISOR OR CLIENT

(INFORMATION IN THIS SECTION DOES NOT NEED TO BE TYPEWRITTEN)

By my signature, I hereby verify that the above record of experience of this candidate is to the best of my knowledge and belief a true and accurate record of his/her work experience.

SUPERVISING LICENSED PROFESSIONAL ENGINEER, SUPERVISOR OR CLIENT'S NAME (PLEASE PRINT)

SIGNATURE

DATE

PLEASE GIVE YOUR LICENSE NUMBER AND WHICH STATE YOU ARE LICENSED IN

HOW LONG HAVE YOU BEEN ACQUAINTED WITH THE APPLICANT AND IN WHAT CAPACITY?

COMMENTS



Missouri law requires that each Professional Engineer licensed in the State of Missouri must meet continuing education requirements as a condition for license renewal. Each licensee must complete **PARTS I and II** of the form, furnishing the details of PDHs earned; and must certify by providing a signature and date in **PART III**. This form is to be retained as part of your records for a period of four years. **A copy of this completed form and copies of all other documentation supporting your professional development hours must be submitted to the APEPLSPLA Board. If you have completed the CPC Reporting Form prescribed by NCEES, it may be submitted in lieu of this form.**

