BEFORE COMPLETING THE APPLICATION PACKAGE, read and then follow the directions as they apply to you. This will aid you in accurately completing your application and thus, eliminate any delay in processing. THE APPLICATION WHICH YOU SUBMIT IS VALID FOR THREE YEARS FROM DATE OF RECEIPT. If you are issued a license, please be advised your license will expire on November 30 of each even-numbered year.

All applicants must complete the 4-page Application for Licensure/Examination and submit it with the supporting documents required by the method under which application is being made.

You may apply for licensure under one of the following application methods: Land Surveyor-in-Training Examination, Land Surveyor Examination, Endorsement of License, or Restoration.

In order for your application to be processed, ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED with the application and required fee unless otherwise directed in the instructions.

Table of Contents

<table>
<thead>
<tr>
<th>General Information</th>
<th>Page #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Need Assistance</td>
<td>2</td>
</tr>
<tr>
<td>Application for Licensure/Examination</td>
<td>2-3</td>
</tr>
<tr>
<td>Examination</td>
<td>4</td>
</tr>
<tr>
<td>Land Surveyor-in Training</td>
<td>4</td>
</tr>
<tr>
<td>Professional Land Surveyor</td>
<td>5</td>
</tr>
<tr>
<td>Endorsement of License</td>
<td>6</td>
</tr>
<tr>
<td>Restoration</td>
<td>7</td>
</tr>
<tr>
<td>Study Materials and Refresher Courses</td>
<td>8</td>
</tr>
</tbody>
</table>

FIRM REGISTRATION REQUIRED

Any corporation, professional service corporation, partnership, limited liability partnership, or limited liability company, which includes in its stated purposes, practice or holds itself out as available to practice land surveying is required by Illinois statute to register with the Department as a Professional Design Firm. Authority to transact business in Illinois must be obtained from the Illinois Secretary of State's office prior to registering with the Department.

Any sole proprietorship owned by an Illinois licensed land surveyor and conducting business under an assumed name (a name other than the real name of the sole proprietor) is required to register as a Professional Design Firm.

Any general partnership which includes in its stated purpose, practice, or holds itself available to practice land surveying shall register as a Professional Design Firm.

A separate Professional Design Firm application and fee is required.

Additional application forms can be downloaded from the IDFPR Web site at www.idfpr.com.
**Need Assistance**

If assistance is needed, direct your request to the following telephone number:
1-800-560-6420
TTY - 1-866-325-4949

Please allow 3 weeks from mailing your application before making an inquiry concerning its status.

---

**Application for Licensure/Examination**

Complete the four-page Application for Licensure/Examination as follows:

1. **Part I-A, Application Category Information**--Select method of application and complete Part I as indicated below:

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<tr>
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</thead>
<tbody>
<tr>
<td>Land Surveyor-in-Training</td>
<td>028</td>
<td>Examination</td>
<td>$70</td>
</tr>
<tr>
<td>Land Surveyor</td>
<td>035</td>
<td>Examination</td>
<td>$150</td>
</tr>
<tr>
<td>Land Surveyor</td>
<td>035</td>
<td>Endorsement of License</td>
<td>$150</td>
</tr>
<tr>
<td>Land Surveyor</td>
<td>035</td>
<td>Restoration</td>
<td>*</td>
</tr>
</tbody>
</table>

*See Supporting Document RS for fee amount.

2. **Part I-B**--Check the box indicating the appropriate information regarding your application.

3. **Part II, Applicant Identifying Information**--Enter all applicable information requested. You must include your social security number in Box 3.

4. **Part III, Education Information**
   
a. Numbers 1 through 5--Enter all applicable information requested.
   
b. Number 6--Indicate all post secondary education which you have attended since graduation from high school. Please indicate beginning and ending dates by year.
   
c. If you are a foreign-educated graduate, the following documents must accompany your application:

1) A course by course evaluation report of your foreign educational credentials from the American Association of Collegiate Registrars and Admissions Officers (AACRAO). To obtain an evaluation packet, contact AACRAO by mail at:

   American Association of Collegiate Registrars and Admissions Officers
   1 Dupont Circle NW, Suite 520
   Washington, DC  20036

   Telephone:  202-355-1041
   Email:  ies@aacrao.org
   Website:  www.aacrao.org

   Official transcripts must be forwarded directly to the AACRAO from the educational institution.
2) Proof of completion of the Test of English as a Foreign Language—internet Based Test (TOEFL-iBT) with a minimum score of 26 on the speaking module and a total minimum integrated score of 88, or the Test of English as a Foreign Language (TOEFL) with a score of 550 for the paper-based examination or 213 for the computer-based test, and the Test of Spoken English (TSE) with a score of 50 for all applicants who graduated from an engineering program outside the United States or its territories and whose first language is not English. To obtain information about TOEFL-iBT and TOEFL and TSE testing, contact:

TOEFL Services
Educational Testing Services
P.O. Box 6151
Princeton, New Jersey 08541-6151

Telephone 609-771-7100
FAX 610-290-8972
www.ets.org

In order to determine countries whose first language is English, the applicant shall submit verification from the college or university that the land surveying program from which the applicant graduated was taught in English.

5. Part IV, Record of Licensure Information--Indicate in this area whether or not you have ever held a license as a Land Surveyor-in-Training, Professional Land Surveyor, or a related license.

6. Part V, Record of Examination--If you have ever passed the Fundamentals of Surveying Examination, the Principles and Practice of Land Surveying Examination, or another licensing examination in Illinois or any other jurisdiction, indicate this in Part V (page three) of the application.

7. Part VI, Personal History Questions--Must be completed by all applicants.

8. Part VII, Examination Coding Information--DO NOT COMPLETE PART VII (page four) of the Application for licensure and/or Examination.

9. Part VIII, Child Support and/or Student Loan Information--Must be completed by all applicants.

10. Part IX, Certifying Statement--Read the certifying statement and then sign and date your application.
An application and application fee is valid for 3 years. If you are applying to retake an examination, DO NOT submit a new application to the Department unless your application has expired; contact Continental Testing Services, Inc. at 708-354-9911 for procedures to follow. If your application expired, you are required to submit all documents listed below and satisfy the requirements in force at the time of reapplication.

The application for examination is a dual application process. Your application for examination will be evaluated by the Illinois Land Surveyors Licensing Board to determine your eligibility for examination. Once your application has been evaluated, the Department will notify you of the results of the evaluation. If appropriate, an Examination Registration Form and further instructions will be provided.

In order for your application to be processed, ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED with the application and required fee unless otherwise directed in the instructions.

Land Surveyor-in-Training

The application which you submit is valid for 3 years from date of receipt.

You must submit the documents listed below.

1. Properly completed 4-page Application for Licensure/Examination (see page 2).

2. Proof of Education: Official college transcript(s) of either
   a) A baccalaureate degree in land surveying or
   b) A baccalaureate degree in a related science with at least 24 semester hours of land surveying courses.

3. Foreign educated applicants must submit a course by course evaluation of education credentials and proof of TOEFL and TSE OR TOEFL-iBT (see pages 2-3)

4. Fee amount is indicated on REFERENCE SHEET A. Fee must be in the form of a check or money order made payable to the Illinois Department of Financial and Professional Regulation. Application will not be processed if fee is not submitted. Fees are not refundable.
In order for your application to be processed, ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED with the application and required fee unless otherwise directed in the instructions.

The application which you submit is valid for 3 years from date of receipt. To apply to take the examination for licensure as a Professional Land Surveyor, you must hold a valid Land Surveyor-in-Training license.

You must submit the documents listed below:

1. Properly completed 4-page Application for Licensure/Examination (see page 2).

2. Proof of education: Official college transcript(s) of either
   a) A baccalaureate degree in land surveying or
   b) A baccalaureate degree in a related science with at least 24 semester hours of land surveying courses.

3. If applicable, evaluation of foreign-education credentials and proof of TOEFL and TSE OR TOEFL-iBT (see pages 2-3).

4. Properly completed Supporting Document VE-LSR. This document must be completed by a professional licensed land surveyor showing a specific record of land surveying experience. The four (4) years of experience in responsible charge of the land surveying activities must be acquired AFTER passage of the Fundamentals of Surveying examination and be under the direct supervision of a licensed Professional Land Surveyor.

5. Supporting Document CT-LSR. This document is required if you hold a certificate as a Surveyor-in-Training or registration in another U.S. jurisdiction. You must direct the licensing Agency/Board to return the completed CT-LSR to you in a sealed envelope to be submitted with your application.

   NOTE: If you have been issued a certificate as a Land Surveyor-in-Training in the State of Illinois, you must indicate this in Part IV (page three) of the Application for Licensure and/or Examination for it to be considered. Supporting document CT-LSR from Illinois is not required.

6. Fee amount is indicated on REFERENCE SHEET A. Payment must be in the form of a check or money order payable to the Illinois Department of Financial and Professional Regulation. Application will not be processed if fee is not submitted. Fees are not refundable.
ENDORSEMENT OF LICENSE

In order for your application to be processed, ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED with the application and required fee unless otherwise directed in the instructions.

The application which you submit is valid for 3 years from date of receipt. To apply for licensure by endorsement, you MUST hold an ACTIVE license/registration as a Land Surveyor in another U.S. jurisdiction. The requirements for licensure in the other jurisdiction must be, on the date of granting the original license, substantially equal to the requirements in force in Illinois on that date. Applicants licensed after January 1, 1990, must acquire 4 years of experience in responsible charge after the Fundamentals of Surveying examination. Applicants originally licensed after January 1, 1998, shall have a baccalaureate degree in land surveying or a baccalaureate degree in a related science meeting Illinois requirements including at least 24 semester hours of land surveying courses to qualify for the licensure as a land surveyor.

NOTE: Based on the Illinois Land Surveyors Licensing Board's evaluation of your application, you may be required to provide additional documentation or appear for an interview before the Board. Passage of the Illinois Jurisdictional Examination is required for licensure in Illinois.

Submit the documents listed below:

1. Properly completed 4-page Application for Licensure/Examination (see page 2).
2. Submit the following proof of educational documents:
   a. High school diploma or its equivalent (if licensed prior to 1998), OR
   b. Official college transcripts issued by each college or university attended with school seal affixed with at least 24 semester hours of Land Surveying courses if licensed after 1998.
3. If applicable, evaluation of foreign education and proof of TOEFL and TSE or TOEFL-iBT (see pages 2-3.)
4. Properly completed Supporting Document VE-LSR must be completed by a professional licensed land surveyor showing a specific record of land surveying experience. The experience shall have been acquired under a licensed land surveyor and provide evidence of a minimum of 4 years in responsible charge of the land surveying activities.
5. Properly completed Supporting document CT-LSR must be completed by the U.S. jurisdiction of original licensure and the U.S. jurisdiction of current licensure where you have most recently been practicing. If examinations were passed in different states, verification from EACH state is required. You must direct the licensing Agency/Board to return completed form CT-LSR to you in a sealed envelope to be submitted with your application. The Agency/Board may also submit those documents directly to the Department.
6. Fee in the form of a check or money order made payable to the Department of Financial and Professional Regulation. Application will not be processed if fee is not submitted. Fees are not refundable.
To restore your Illinois Professional Land Surveyor license which has been expired or inactive for more than 5 years, you must submit the application, supporting documents and fee as listed below. Based on the Illinois Land Surveyors Licensing Board's evaluation of your application, you may be required to submit additional documentation to determine your current competency to resume active practice as a Licensed Professional Land Surveyor in Illinois.

The following documents are required:

1. Properly completed 4-page Application for Licensure/Examination (see page 2).
2. Supporting Document CT-LSR.
   This document must be completed by the jurisdiction of current licensure where you have most recently been practicing if other than Illinois for at least the last two years. You must direct the licensing Agency/Board to return the completed document to you in a sealed envelope to be submitted with your application.
3. Properly completed Supporting Document RS. (If this form was not included in the application packet, you must obtain one by contacting the Department of Financial and Professional Regulation at 1-800-560-6420.)
4. Properly completed Supporting Document VE-LSR.
   This document must be completed by the employer as evidence that you have been employed in a responsible capacity by a licensed land surveyor for at least the last two years.
5. Other evidence of continued competency in land surveying if not licensed in another jurisdiction or not employed by a licensed land surveyor:
   a. Proof of passage of Illinois Jurisdictional Examination and/or the NCEES Examination within one year of application.
   b. Lawfully practicing in land surveying as an employee of a governmental agency.
   c. Teaching land surveying in a college or university
6. Proof of 20 professional development hours in accordance with Section 1270.65 of the Rules for the Administration of the Illinois Professional Land Surveyor Act completed in the 24 months prior to submitting the request to restore.
7. If restoring after active military service, submit copy of DD214.
8. Fee in the form of a check or money order made payable to the Department of Financial and Professional Regulation. Fee amount is indicated in the Official Use Only Box of Supporting Document RS. Application will not be processed if fee is not submitted. Fees are not refundable.
Examination specifications (content and format) for the Fundamentals of Surveying Examination and for the Principles and Practice of Surveying Examination are available from the NCEES website at www.ncees.org.

The National Council of Examiners for Engineering and Surveying (NCEES) has prepared study guides for the Fundamentals of Surveying Examination and for the Principles and Practice of Surveying Examination. To order these study guides, contact NCEES at:

   National Council of Examiners for Engineering and Surveying
   P.O. Box 1686
   Clemson, SC 29633-1686

   Telephone Number: 864-654-6824 or
   Toll-free Telephone Number: 800-250-3196
   FAX: 864-654-6033
   Website: www.ncees.org

The following is a link to where you can access the Reference, Materials and Procedures for the Illinois Land Surveyor Examinations: http://www.idfpr.com/Renewals/Apply/Forms/LE SPEC Exam.pdf

For more information regarding refresher courses and the Illinois Jurisdictional examination contact:

   Illinois Professional Land Surveyor Association (IPLSA)
   100 E Washington Street
   Springfield, IL 62701

   Phone: 217-528-3053
   FAX: 217-528-6545
   Email: info@iplsa.org
   Website: www.iplsa.org/
REFERENCE SHEET ~ EXAMINATION - A

ALL FEES ARE NONREFUNDABLE
Department reserves the right to change examination dates, filing deadlines and fees if prevailing circumstances necessitate such action.

CHART I - PROFESSION NAME, PROFESSION CODE, LICENSURE METHOD & FEE

This chart contains fee information for examination only.

<table>
<thead>
<tr>
<th>PROFESSION NAME</th>
<th>PROFESSION CODE</th>
<th>LICENSURE METHOD</th>
<th>APPLICATION FEE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Land Surveyor-in-Training</td>
<td>028</td>
<td>Application (IDFPR)</td>
<td>$75.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Examination (NCEES)</td>
<td>$225.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Examination (CTS)</td>
<td>$173.00</td>
</tr>
</tbody>
</table>

An application submitted without the application fee will be returned for resubmission with the appropriate fee.

CHART II - EXAMINATION CODES AND FEES

This application for examination is a triple process, you must:

☐ Submit a written application to IDFPR for the Land Surveyor Board to review and approve. If approved, you must:

☐ Register for the examination through the Internet on the NCEES website (www.ncees.org) and receive a NCEES ID number; and

☐ Complete the Department’s licensure/examination application by applying online at www.continentaltesting.net. Once you have completed all processes and are determined eligible you will receive:

☐ An Authorization to Test (ATT) that will contain the necessary information to schedule yourself for this examination.

CHART III - AVAILABLE EXAMINATION DATES - Information will be available once you are approved for the exam and sign up through NCEES with PearsonVue.

The Fundamentals of Surveying, starting in January of 2014, will be a Computer Based Test (CBT). That examination will be available in four quarters of the year (applicants can only schedule once a quarter for a maximum of three (3) tries per calendar year). All applicants for the FS under the Illinois Professional Land Surveying Act authority must submit an application to the Department for review by the Board. Do not schedule an examination unless you have been approved by the Board.

REQUEST FOR ASSISTANCE

If assistance is needed, direct your request (based upon your licensure method) to:

Licensure Methods Except Examination (US ONLY)
1-800-560-6420 (option 8)
TTY
1-866-325-4949

Examination Licensure Method Only
708/354-9911

Please allow 6 weeks from mailing your application before making an inquiry concerning its status.
Illinois Department of Financial and Professional Regulation

Division of Professional Regulation

Application Checklist for Land Surveyors

**In order for your application to be processed,**

**ALL REQUIRED SUPPORTING DOCUMENTATION MUST BE SUBMITTED**

with the application and required fee unless otherwise directed in the instructions.

Before you mail your application, check the following items to make sure your application is complete!

<table>
<thead>
<tr>
<th>FOUR-PAGE APPLICATION REVIEW</th>
<th>COMPLETED</th>
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</thead>
<tbody>
<tr>
<td>Application Fee</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>SUPPORTING DOCUMENTS</th>
<th>SUBMITTED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NCEES</strong> Council Record or (education, employment and licensure as noted below)</td>
<td></td>
</tr>
<tr>
<td>Proof of Education (High School Diploma or Official Transcripts)</td>
<td></td>
</tr>
<tr>
<td>Verification of Employment (VE-LSR) from:</td>
<td></td>
</tr>
<tr>
<td>Certification of Licensure/Examination (CT-LSR) from <em>original</em> state of licensure and <em>current</em> state of licensure, including each state where examinations were passed:</td>
<td></td>
</tr>
<tr>
<td><strong>TOEFL</strong> and TSE or <strong>TOEFL-iBT</strong> examination results</td>
<td></td>
</tr>
<tr>
<td><strong>AACRAO</strong> evaluation of foreign educational credentials</td>
<td></td>
</tr>
<tr>
<td>Form RS, if applicable</td>
<td></td>
</tr>
<tr>
<td>Copy of <strong>DD214</strong> if restoring license from active military service</td>
<td></td>
</tr>
</tbody>
</table>

All supporting documents *may not be required*. Please refer to application instructions for your specific method of licensure.
The following materials are required to make Application for Licensure and/or Examination in Illinois:
1. Four page APPLICATION FOR LICENSURE AND/OR EXAMINATION.
2. INSTRUCTION SHEET, which gives step by step application instructions for your profession.
3. REFERENCE SHEET, which gives detailed coding information for your profession.
4. SUPPORTING DOCUMENTS, forms, and/or any other documentation you may be required to submit with your application.
5. If the name shown on your supporting documents is different from that shown on your application, you must submit PROOF OF LEGAL NAME change - copy of marriage license, divorce decree, affidavit or court order.

### PART I: Application Category Information

<table>
<thead>
<tr>
<th>1. PROFESSION NAME</th>
<th>2. PROFESSION CODE</th>
<th>3. LICENSURE METHOD</th>
<th>4. FEE</th>
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</table>

**B. CHECK BOX INDICATING THE APPROPRIATE INFORMATION REGARDING YOUR APPLICATION**

- [ ] This is the first time I have made application for this profession in Illinois.
- [ ] I have previously made application for this profession in Illinois. However, my previous application expired and I am now reapplying.
- [ ] Other: ____________________________________________________________________________

**PART II: Applicant Identifying Information**

- You must notify the Department of Financial and Professional Regulation - Division of Professional Regulation and/or Continental Testing Service in writing, of any address changes after you file this application in order to receive any further information.

<table>
<thead>
<tr>
<th>1. NAME</th>
<th>LAST</th>
<th>FIRST</th>
<th>MIDDLE</th>
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<tr>
<th>2. TITLE (e.g., M.D., D.D.S., etc.)</th>
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<tr>
<th>3. UNITED STATES SOCIAL SECURITY NO.</th>
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<th>STREET</th>
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<th>STATE/COUNTRY</th>
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<th>COUNTY</th>
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<tr>
<th>5. BUSINESS ADDRESS</th>
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<th>STATE/COUNTRY</th>
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<th>COUNTY</th>
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<tr>
<th>6. MAIDEN, GIVEN SURNAME, OR ANY NAME(S) UNDER WHICH SUPPORTING DOCUMENTS WILL BE SUBMITTED. (SEE INSTRUCTIONS #5 ABOVE)</th>
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<table>
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<tr>
<th>7. MOTHER'S MAIDEN NAME</th>
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<table>
<thead>
<tr>
<th>8. PLACE OF BIRTH</th>
<th>CITY</th>
<th>STATE/COUNTRY</th>
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<tr>
<th>9. DATE OF BIRTH</th>
<th>Month</th>
<th>Day</th>
<th>Year</th>
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<table>
<thead>
<tr>
<th>10. AGE</th>
<th>Female</th>
<th>Male</th>
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<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>11. TELEPHONE NUMBER WHERE YOU MAY BE REACHED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work: (<em><strong><strong><strong>) <em><strong><strong><strong>--</strong></strong></strong></em>--</strong></strong></strong></em></td>
</tr>
<tr>
<td>(Area Code)</td>
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<tr>
<td>Home: (<em><strong><strong><strong>) <em><strong><strong><strong>--</strong></strong></strong></em>--</strong></strong></strong></em></td>
</tr>
<tr>
<td>(Area Code)</td>
</tr>
<tr>
<td>Fax: (<em><strong><strong><strong>) <em><strong><strong><strong>--</strong></strong></strong></em>--</strong></strong></strong></em></td>
</tr>
<tr>
<td>(Area Code)</td>
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<tr>
<td>Fax: (_______) ____________________________</td>
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<td>(Area Code)</td>
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<tr>
<th>12. REQUIRED E-MAIL ADDRESS</th>
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</tbody>
</table>

Additional application forms can be downloaded from the IDFPR Web site at [www.idfpr.com](http://www.idfpr.com).
### PART III: Education Information

1. **PRELIMINARY EDUCATION** (Elementary and High School or G.E.D. Circle number of years completed)
   - 1 2 3 4 5 6 7 8 9 10 11 12
   - Graduated High School? [ ] Yes [ ] No
   - OR G.E.D.? [ ] Yes [ ] No

2. **NAME OF LAST PRELIMINARY SCHOOL ATTENDED**

3. **LAST PRELIMINARY SCHOOL LOCATION**
   - (City and State)

4. **DATE OF GRADUATION**
   - Month /____ Year

5. **COLLEGE OR UNIVERSITY** (Circle number of years completed)
   - 1 2 3 4 5 6 7 8
   - Graduated? [ ] Yes [ ] No

6. **COLLEGE OR UNIVERSITY NAME**
   - (Undergraduate and Graduate)
   - LOCATION
     - (City and State or Country)
   - DATES OF ATTENDANCE
     - FROM [ ] Month/Year
     - TO [ ] Month/Year
   - TYPE OF DEGREE EARNED

7. **SPECIALIZED TRAINING** (Residency, Professional Training, Vocational Training, Practical or Clinical Training)
   - INSTITUTION NAME
   - LOCATION
     - (City and State or Country)
   - DATES OF ATTENDANCE
     - FROM Month/Year
     - TO Month/Year
   - Did You Complete Training? [ ] Yes [ ] No
### PART IV: Record of Licensure Information

If you have ever been licensed to practice the profession for which you are now making application, or held a related license, complete the information requested below. If you have ever held a temporary, trainee or apprenticeship license, or a permit, it must be listed here also. In addition, the INSTRUCTION SHEET enclosed with this Application package may instruct you to have Certification(s) of Licensure in other state(s) prepared and submitted in support of your application (contact other state(s) regarding possible fee). You must also list all other licenses held in Illinois, however, certification of licensure from Illinois is not required. Failure to disclose all licenses held may result in denial of your application or other appropriate action.

<table>
<thead>
<tr>
<th>STATE</th>
<th>PROFESSION NAME</th>
<th>LICENSE NUMBER</th>
<th>DATE OF ISSUANCE</th>
<th>LICENSE STATUS (Active, Lapsed, etc.)</th>
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</thead>
<tbody>
<tr>
<td>State of Original Licensure</td>
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<tr>
<td>State of Current Licensure where you most recently have been practicing.</td>
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<td>Other States of Licensure</td>
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*(If additional space is needed, attach a separate sheet.)*

### PART V: Record of Examination

If you have ever taken a licensure examination in Illinois or any other state for the profession for which you are now making application, you must complete the information requested below. EACH EXAMINATION ATTEMPT MUST BE SHOWN. Failure to disclose an examination attempt may result in the denial of your application or other appropriate action.

<table>
<thead>
<tr>
<th>NAME OF EXAMINATION</th>
<th>STATE</th>
<th>MONTH/YEAR</th>
<th>EXAM RESULTS (Passed, Failed, Absent)</th>
</tr>
</thead>
<tbody>
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*(If additional space is needed, attach a separate sheet.)*
PART VI: Personal History Information (This part must be completed by all applicants)

1. Have you been convicted of or pled guilty or nolo contendere to any criminal offense in any state or in federal court? Please do not give details on minor traffic charges, but do include information relating to Driving While Intoxicated (DWI) charges. If yes, attach a personal statement describing the circumstances of the conviction and certified copies of court records of your conviction including the nature of the offense, date of discharge, and a statement from the probation or parole office. In general, a criminal conviction by itself does not usually result in denial of licensure.

2. Have you been convicted of a felony? In general, a felony conviction by itself does not usually result in denial of licensure.

3. If yes, have you been issued a Certificate of Relief from Disabilities by the Prisoner Review Board? If yes, attach a copy of the certificate.

4. Do you have any disease or condition that interferes with your ability to perform the essential functions of your profession, including any disease or condition generally regarded as chronic by the medical community, i.e., (1) mental or emotional disease or condition; (2) alcohol or other substance abuse; (3) physical disease or condition, that presently interferes with your ability to practice your profession? If yes, attach a detailed statement, including an explanation whether or not you are currently under treatment.

5. Have you been denied a professional license or permit, or privilege of taking an examination, or had a professional license or permit disciplined in any way by any licensing authority in Illinois or elsewhere? If yes, attach a detailed explanation.

6. Have you ever been discharged other than honorably from the armed service or from a city, county, state or federal position? If yes, attach a detailed explanation.

PART VII: Examination Coding Information (This part is for examination applicants only)

Refer to the REFERENCE SHEET enclosed with this application package and complete the following:

a) CHART II - Select examination(s) you desire and enter Test Codes.

b) CHART III - Select the examination site you desire and enter Test Center Code:

c) CHART IV - Find your School of Graduation and enter school code:

PART VIII: Child Support and/or Student Loan Information (Every applicant is required by law to respond to the following questions)

1. In accordance with 5 Illinois Compiled Statutes 100/10-65(c), applications for renewal of a license or a new license shall include the applicant's Social Security number, and the licensee shall certify, under penalty of perjury, that he or she is not more than 30 days delinquent in complying with a child support order. Failure to certify shall result in disciplinary action, and making a false statement may subject the licensee to contempt of court.

Are you more than 30 days delinquent in complying with a child support order? (NOTE: If you are not subject to a child support order, answer "no.")

Yes ☐ No ☐

2. In accordance with 20 Illinois Compiled Statutes 2105/2105-(5), "The Department shall deny any license or renewal authorized by the Civil Administrative Code of Illinois to any person who has defaulted on an educational loan or scholarship provided by or guaranteed by the Illinois Student Assistance Commission or any governmental agency of this State; however, the Department may issue a license or renewal if the aforementioned persons have established a satisfactory repayment record as determined by the Illinois Student Assistance Commission or other appropriate governmental agency of this State." (Proof of a satisfactory repayment record must be submitted.)

Are you in default on an educational loan or scholarship provided/guaranteed by the Illinois Student Assistance Commission or other governmental agency of this State?

Yes ☐ No ☐

PART IX: Certifying Statement

Under penalties of perjury, I declare that I have examined the application and all supporting documents submitted by me in connection therewith, and to the best of my knowledge, they are true, correct, and complete.

______________________________________________
Signature of Applicant

______________________________________________
Date

I UNDERSTAND THAT FEES ARE NOT REFUNDABLE. My signature above authorizes the Department of Financial and Professional Regulation to reduce the amount of this check if the amount submitted is not correct. I understand this will be done only if the amount submitted is greater than the required fee hereunder, but in no event shall such reduction be made in an amount greater than $50.