GENERAL INFORMATION — REGISTRATION

APPLICATION FOR REGISTRATION TO PRACTICE LAND SURVEYING BY RECIPROCITY

PRINT OR TYPE LEGIBLY

GENERAL INFORMATION	
NAME (AS DESIRED ON CERTIFICATE):	
SOCIAL SECURITY NUMBER: (last 4 digits)	
DATE OF BIRTH:	
RESIDENCE ADDRESS:	
	AFFIX SIGNED
COMPANY NAME:	2" x 3"
BUSINESS ADDRESS:	PHOTOGRAPH
BUSINESS TELEPHONE:	
RESIDENCE TELEPHONE:	
EMAIL ADDRESS:	
REGISTRATION	
STATE OF FIRST REGISTRATION AS A LAND SURVEYOR:	
DATE AND NUMBER OF CERTFICATE:	
HAVE YOU BEEN DENIED REGISTRATION IN ANY STATE?	
OTHER STATES IN WHICH YOU ARE REGISTERED AS A LAND SURVEYOR:	
HAS YOUR REGISTRATION BEEN SUSPENDED OR REVOKED IN ANOTHER STATE? IF "YES" ATTACH DETAILS.	
HAVE YOU PREVIOUSLY SUBMITTED AN APPLCATION FOR REGISTRATION AS A LAND SUREYOR IN NEBRASKA?	
ARE YOU REGISTERED AS A SURVEYOR-IN-TRAINING? IF SO, PROVIDE NUMBER, DATE & STATE.	

DUCATION — REFERENCES

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CHECK HERE IF YOU HAVE A NCEES RECORD. YOU DO Go to the NCEES website - www.ncees.org/records - to have PLEASE REQUEST VERIFICATION OF LICENSURE/EXAM NCEES RECORD IS NOT SUBMITTED AS PART OF THIS	e your Record electronically sent to MINATION FROM STATES IN WH	to us. Please be sure your NCEE	S Record is up-to-date.	
EDUCATION				
STATE IN CHRONOLOGICAL ORDER THE NAME AND LOCATION OF EACH HIGH OR PREPATORY SCHOOL, CORRESPONDENCE SCHOOL, RESEARCH WORK, ETC.	SCHOOL, COLLEGE, UNIVERSITY OR TECHNICAL	SCHOOL ATTENDED, THE TIME SPENT AT EACH	AND, IF A GRADUATE, THE YEAR OF GRADUATIO	N. ALSO LIST GRADUATE WORK, EVENING
THE APPLICATION MUST BE ACCOMPANIED BY COPIES OF DOCUMENTS TO PROVE:				
GRADUATION FROM COLLEGE; TRANSCRIPTS OF CREDITS SHOWING DATES OF GRADUATION AND DEGREES RECEIVED. COLLEGE TRAINING WITHOUT GRADUATION; TRANSCRIPTS OF CREDITS.				
NAME AND LOCATION OF INSTITUTION	YEARS FROM & TO	DATE GRADUATED	TECHNICAL COURSE	DEGREE RECEIVED
REFERENCES OF CHARACTER AND QUALIFICATIONS				
FIVE OR MORE REFERENCES ARE REQUIRED. REFERENCES SHALL NOT BE RELATED TO THE APPLICANT'S LAND				
SURVEYING HISTORY AND MUST BE ABLE TO VOUCH FOR HIS OR HER QUALIFICATIONS. ONE OF THESE THREE REFERENCES MUST BE A REGISTERED LAND SURVEYOR.				
NAME & LS# (If Registered)	COMPANY, P.O. ADDRESS, CITY, STATE & ZIP		BUSINESS RELATION TO APPLICANT	

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CODE OF ETHICS

I HEREBY SUBSCRIBE TO AND AGREE TO ABIDE BY THE FOLLOWING CODE OF ETHICS:

- 1. TO ACT FOR MY CLIENTS IN PROFESSIONAL MATTERS AS A FAITHFUL AGENT OF TRUSTEE, AND ACCEPT REMUNERATION IN ACCORDANCE WITH STATED CHARGES FOR SERVICES RENDERED MY CLIENTS.
- 2. NEVER ATTEMPT TO INJURE FALSELY OR MALICIOUSLY, DIRECTLY OR INDIRECTLY, THE PROFESSIONAL REPUTATION, PROSPECTS, OR BUSINESS OF ANOTHER LAND SURVEYOR.
- 3. NEVER ATTEMPT TO SUPPLANT ANOTHER LAND SURVEYOR FOR EMPLOYMENT BY THE USE OF UNETHICAL PRACTICES.
- 4. NEVER COMPETE WITH ANOTHER LAND SURVEYOR FOR EMPLOYMENT BY THE USE OF UNETHICAL PRACTICES.
- 5. NEVER REVIEW THE WORK OF ANOTHER LAND SURVEYOR FOR THE SAME CLIENT, EXCEPT WITH THE KNOWLEDGE AND CONSENT OF SUCH LAND SURVEYOR, OR UNLESS THE CONNECTION OF SUCH LAND SURVEYOR WITH THE WORK HAS BEEN TERMINATED.
- 6. NEVER ADVERTISE IN ANY MANNER DEROGATORY TO THE DIGNITY OF THE PROFESSION.
- 7. NEVER BREAK ANY ACCEPTED CODE OF PRACTICE PREVAILING IN THIS STATE OR ANY OTHER GOVERNMENTAL JURISDICTION.

AFFIDAVIT TO BE EXECUTED BY APPLICANT)	
STATE OFCOUNTY OF	ss.
PRINTED NAME OF APPLICANT:	. , BEING DULY SWORN DEPOSES AND SAYS I HAVE READ THE CONTENTS HEREOF, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF THE FOREGOING STATEMENTS ARE TRUE IN SUBSTANCE AND EFFECT AND ARE MADE IN GOOD FAITH.
SUBSCRIBED AND SWORN BEFORE ME THIS DAY OF	(SIGNATURE OF APPLICANT)
(SEAL)	
MY COMMISSION EXPIRES	(SIGNATURE OF NOTARY PUBLIC)