

# MSBRPG FG AND PG EXAM AUTHORIZATION FORM

## For the ASBOG Fundamentals of Geology and Practice of Geology Exams

October 2 or 3, 2025

**INSTRUCTIONS - PLEASE READ THIS FORM CAREFULLY:**

- GRADUATING SENIORS TAKING THE FG EXAM AS AN ASSESSMENT/EXIT EXAM MUST FILL OUT THE MSBRPG ASSESSMENT/EXIT EXAM AUTHORIZATION FORM – NOT THIS FORM.
- GRADUATE STUDENTS MUST CONTACT THE BOARD BEFORE FILLING OUT THIS FORM.
- YOU MUST HAVE A COMPLETE GIT OR RPG APPLICATION (WHICH EVER IS APPLICABLE TO YOU) ON FILE WITH THE MSBRPG – BY September 18, 2025.
- YOU MAY ONLY SIT FOR ONE EXAM ON ANY GIVEN EXAM DATE.
- COMPLETE AND SIGN THIS FORM AND INCLUDE YOUR \$25 AUTHORIZATION PAYMENT (SEE BELOW) AND SEND IT TO THE ADDRESS BELOW.
- THIS FORM AND THE AUTHORIZATION FEE MUST BE RECEIVED BY THE BOARD BY September 18, 2025.
- UPON RECEIPT OF THIS PROPERLY COMPLETED FORM AND PAYMENT YOU WILL BE ADDED TO THE LIST TO RECEIVE AN EMAIL FROM SMT/PROMETRIC TO PAY FOR AND SCHEDULE YOUR EXAM DATE AND SELECT YOUR TESTING CENTER.
- THE EXAMINATION FEES ARE PAID WHEN YOU SCHEDULE YOUR EXAM: \$200 FOR THE FG OR \$250 FOR THE PG AND AN ADDITIONAL \$75 PROCTORING FEE TO THE TESTING COMPANY.

Contact Information: – **MUST BE VALID FOR NO LESS THAN 120 DAYS AFTER THE EXAM DATE.**

**PLEASE PRINT CLEARLY (IF NOT FILLING OUT ONLINE)**

Fundamentals of Geology (FG) Exam \_\_\_\_\_ Practice of Geology (PG) Exam \_\_\_\_\_

Name: \_\_\_\_\_  
(Mr. or Ms.) First Middle Name Last Suffix

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**IMPORTANT DATES**

MSBRPG EXAM AUTHORIZATION FEE DELIVERY DEADLINE	ASBOG'S EXAMINATION SCHEDULING AND FEE PAYMENT EMAIL SENT TO AUTHORIZED EXAMINEES	EXAMINATION DATE	EXAMINATION START TIME
September 18, 2025	Sent upon Board receipt of this form.	October 2 or 3, 2025	Varies by site

EXAMINATION AUTHORIZATION FEE .....\$25.00\* (non-refundable)

**PAYMENT MUST BE BY CHECK OR MONEY ORDER – MADE PAYABLE TO MSBRPG.**

**SEND YOUR PAYMENT AND THIS COMPLETED FORM TO:**

**MSBRPG, P.O. BOX 22742, JACKSON, MS 39225-2742**

I ACKNOWLEDGE THAT I HAVE READ THIS FORM AND AGREE TO ALL OF ITS TERMS AND CONDITIONS CONTAINED HEREON. I FURTHER ACKNOWLEDGE THAT I HAVE READ THE RULES OF THE BOARD AND ATTEST THAT I AM IN FULL COMPLIANCE THEREOF IN REQUESTING TO SIT FOR THIS EXAMINATION AS SO SIGNIFIED BY MY SIGNATURE **(REQUIRED)** BELOW:

\_\_\_\_\_  
 PRINTED NAME OF EXAMINEE

\_\_\_\_\_  
 SIGNATURE OF EXAMINEE

\_\_\_\_\_  
 DATE