

***MISSISSIPPI STATE BOARD
OF REGISTERED
PROFESSIONAL GEOLOGISTS***

Application Materials
***(PURSUANT TO THE UNIVERSAL RECOGNITION OF
OCCUPATIONAL LICENSES ACT)***

November 25, 2025

UNIVERSAL RECOGNITION APPLICANT CHECKLIST

This check list is for your use only, to be used as a tool in determining whether you are eligible to apply for Mississippi registration as a geologist based upon the Universal Recognition of Occupational Licenses Act (Miss. Code Ann. § 73-50-2).

I am a resident of the State of Mississippi and can prove residence to the Board by producing a copy of a Mississippi-issued driver's license or photo identification card; current Mississippi residential utility bill bearing my name and Mississippi address, documentation of my current ownership or lease of a Mississippi residence, or other verifiable documentation.

I hold a current and valid license in good standing in another state in the practice of geology or another occupation with a similar scope of practice, for at least one year,

OR

I have worked as a geologist, or in an occupation with a similar scope of practice, in another state which did not use a license to regulate the occupation, for at least three years.

I have not committed any act in another state that would constitute grounds for refusal, suspension, or revocation of a license or registration to practice geology in Mississippi at the time the act was committed.

I have not been convicted of a felony, pled guilty to a felony or pled nolo contendere (no contest) to a felony.

I have not surrendered a license because of negligence or intentional misconduct related to my work as a geologist in any other state.

I have not had a complaint, allegation or investigation pending before an occupational licensing board or other board in another state related to unprofessional conduct or an alleged crime.

PLEASE NOTE, the Board may require you to pass a jurisprudential examination specific to relevant state laws in Mississippi that regulate the occupation.

FOR MISSISSIPPI RESIDENTS ONLY

APPLICATION FOR REGISTRATION
MISSISSIPPI STATE BOARD OF REGISTERED PROFESSIONAL GEOLOGISTS
P. O. BOX 22742, JACKSON, MS 39225-2742
geology@msbrpg.ms.gov

INSTRUCTIONS

All persons seeking Mississippi registration pursuant to the Universal Recognition of Occupational Licenses Act (Miss. Code Ann. § 73-50-2) must complete the following application.

Where space on the form does not permit you to adequately provide your response, you may provide supplementary sheets of 8 ½ “ x 11” white paper. Each additional sheet shall be printed on one side only and must be signed and dated. Applications must be clearly typed in black ink.

Applications must be signed and notarized.

Your application must be accompanied by the remittance of a non-refundable application fee made payable to the Mississippi State Board of Registered Professional Geologists (MSBRPG) in the amount of Two Hundred and No/100 Dollars (\$200.00).

Upon completion, mail your application with attachments and application fee to the address provided above or email your application with attachments and select electronic invoicing to pay application fee.

An application not properly completed, containing all required information, or accompanied by the required fee will be returned to the applicant with a statement specifying the reason(s) for the application’s return.

UNIVERSAL RECOGNITION OF OCCUPATIONAL LICENSES

Applicants who seek Mississippi registration as a geologist must be current Mississippi residents and provide proof of residence at the time of application. Proof of residency includes, but is not limited to, the following documentation: a copy of a Mississippi-issued driver’s license or Mississippi-issued photo identification card; current Mississippi residential utility bill bearing the applicant’s name and Mississippi residence address; documentation of the applicant’s current ownership or lease of a Mississippi residence; or any other verifiable documentation. ***Please do not provide original documents.***

In addition to Mississippi residency, an applicant seeking universal recognition must either hold a current and valid license in good standing in another state in the practice of geology or an occupation with a similar scope of practice, for at least one (1) year, **OR** have worked in the practice of geology, or in an occupation with a similar scope of practice, in another state that did not use a license or registration to regulate the occupation for at least three (3) years. The applicant’s successful completion of the minimum educational requirements, work experience, examination, and clinical supervision requirements in effect at that time to be licensed in that state are subject to verification by the Board.

Applicants seeking Mississippi registration pursuant to the Act:

- 1) must not have committed any act in another state that would constitute grounds for refusal, suspension, or revocation of a license to practice that occupation in Mississippi at the time the act was committed;
- 2) must not have surrendered a license because of negligence or intentional misconduct related to the applicant’s work in the occupation in the other state; and
- 3) must not have a complaint, allegation or investigation pending before an occupational licensing board or other board in another state that related to unprofessional conduct or an alleged crime.

FOR MISSISSIPPI RESIDENTS ONLY

PART I. GENERAL INFORMATION

Name: _____
(Title) (First Name) (Middle Name) (Last Name) (Suffix)

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work #: _____

Year of Birth: _____ Place of Birth: _____

E-Mail (home): _____ E-Mail (work): _____

Employer: _____

Employer's Address: _____

Employer's City: _____ State: _____ Zip: _____

Employer's Phone: _____

State of Legal Residence: _____ (Please submit proof of residency with your application. Proof of residency includes but is not limited to the following documentation: a copy of a Mississippi-issued driver's license or Mississippi-issued photo identification card; current Mississippi residential utility bill bearing the applicant's name and Mississippi residence address; documentation of the applicant's current ownership or lease of a Mississippi residence; or any other verifiable documentation. *Do not provide original documents.*)

Are you a United States citizen? Yes No

If no, are you authorized to work in the United States? Yes No

Select payment option: Check/Money order mailed Request Electronic Invoice
(transaction fee added by MS.gov)

PART II. REGISTRATION AND LICENSURE HISTORY

Have you ever been registered as a geologist in the state of Mississippi? Yes No

If yes, provide your date of registration: _____

If yes, provide your RPG number: _____

Do you currently hold a valid license or registration, in good standing, in another state in the practice of geology or an occupation having a similar scope of practice? Yes No

If yes, identify the Occupation or Practice Area: _____

State of Issuance: _____

Date of Issuance: _____ Educational Requirements: _____

Work Experience: _____

Testing Taken: _____

Date: _____

Score: _____

Clinical Supervision Requirements: _____

Name of Supervisor and Contact Information: _____

PART II. REGISTRATION AND LICENSURE HISTORY - continued

Have you worked as a geologist or in an occupation having a similar scope of practice in a state that does not issue a license or registration to regulate the occupation? Yes No

If yes, identify the Occupation or Practice Area: _____

State(s) _____

Dates during which you worked in the occupation in each State: _____

Have you ever been refused certification, licensure, registration, or renewal? Yes No

If yes, identify the State(s): _____

Agency or Organization: _____

Certificate, License, or Registration: _____

Date: _____ Stated Reason: _____

Have you ever had a certification, license or registration revoked, suspended or otherwise been the subject of disciplinary action? Yes No

If yes, identify the State(s): _____

Agency or Organization: _____

Certificate, License, or Registration: _____

Date: _____ Stated Reason: _____

PART II. REGISTRATION AND LICENSURE HISTORY - continued

Have you ever surrendered a certification, license, or registration? Yes No

If yes, identify the State(s): _____ Agency or Organization: _____

Certificate, License, or Registration: _____

Date: _____ Stated Reason: _____

Have you ever been the subject of a complaint, allegation or investigation filed with an occupational licensing board or other board in another state related to allegations of unprofessional conduct, negligence, intentional misconduct, or the commission of a crime?

Yes No

If yes, identify the State(s): _____

Agency, Licensing or Other Board: _____

Specific Allegations: _____

Disposition: _____

PART III. AFFIDAVIT

STATE OF _____

COUNTY/PARISH OF _____

PERSONALLY, came and appeared before me, the undersigned Notary, the within named _____, and makes this, his/her statement and Affidavit upon oath and affirmation of belief and personal knowledge that the following matters, facts and things set forth herein are true and correct to the best of his/her knowledge:

1. I am over the age of twenty-one and am competent to testify as to all matters set forth herein.
2. I suffer no legal disabilities and have personal knowledge of the facts set forth in this Application.
3. I understand that, in affixing my signature to this Application, I warrant that all statements made herein and on any attached sheets are true and correct to the best of my knowledge, information and belief.
4. I understand that, in affixing my signature to this Application, I acknowledge that I have read and understand the Universal Recognition of Occupational Licensing Act, the Registered Professional Geologists Practice Act, and the Administrative Rules of the Mississippi State Board of Registered Professional Geologists.
5. I affirm I shall adhere to the Code of Ethics and Professional Conduct and all other requirements as set forth therein.

DATED this the _____ day of _____, _____.

AFFIANT/MILITARY APPLICANT

SWORN to and subscribed before me, this the _____ day of _____.

NOTARY PUBLIC

My Commission Expires: