



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

Application Materials

July 31, 2023

**MISSISSIPPI STATE BOARD OF REGISTERED PROFESSIONAL GEOLOGISTS
P. O. BOX 22742
JACKSON, MS 39225-2742**

Application Check List - this page is for your information and is NOT to be returned.

This check list is to be used by the applicant to ensure that all the required application forms and documents are properly submitted to the Board toward application as a Registered Professional Geologist (RPG) or Enrolled as a Geologist-In-Training (GIT).

The following items must be submitted before the Board can consider your application. Please read all items carefully. **An incomplete application will not be considered.**

1. All items on application forms must be typed. Download this form and fill out Parts A-D on the computer. For Part D fill out Section 1 and include it along with Parts A-C as part of your application to the board. (Note you will also be sending the filled out Section 1 along with Section 2 to your references – see step 5)
2. If applying for a RPG, remittance of non-refundable application fee of \$200.00 made payable to the Mississippi State Board of Registered Professional Geologists (MSBRPG). There is no application fee for a GIT.
3. Application signed.
4. Application notarized.
5. Circulate three reference forms (Part D, sections 1 and 2; 2 pages total) to respondents who have personal knowledge of applicant's geologic experience. Respondents must be geologists as defined by the Act. Enclose a stamped envelope addressed to the Board with each reference. **The respondents must mail the reference forms directly to the Board.**
6. Request official transcript(s) from college or university. The college or university must mail the transcript directly to the Board.
7. Have the Board who administered any examinations send the actual scores and test dates directly to this Board
8. Read and understand the Registered Professional Geologists Practice Act of 1997 and the Rules of the Board.
9. Mail application forms along with the fee to the Board at the address at the top of this page.

Important Notice to Applicants:

All applicants are required to read and understand the Registered Professional Geologists Practice Act of 1997 and the Rules of the Board, and agree to abide by them. These documents, along with copies of the application, may be viewed and downloaded from the Internet at the following website address or you may contact the Board at the address listed at the top of the page. www.msbrpg.ms.gov

If approved for registration you will pay a registration fee (RPG \$200.00; GIT \$100.00) and if desired will be required to purchase a Registered Professional Geologists stamp and/or embossing seal with your personal certificate number through the Board of Registration.

NOTE: IF YOU ARE APPLYING FOR REGISTRATION THROUGH RECIPROCITY OR COMITY PLEASE HAVE YOUR STATE OF REGISTRATION FORWARD A LETTER STATING THAT YOU ARE IN GOOD STANDING WITH THAT BOARD, INCLUDING THE DATE OF YOUR REGISTRATION AND ACTUAL TEST SCORES. IF YOU ARE APPLYING VIA THIS METHOD PLEASE CONTACT US FOR FURTHER INFORMATION.

PART A

**APPLICATION FOR REGISTRATION
MISSISSIPPI STATE BOARD OF REGISTERED PROFESSIONAL GEOLOGISTS
P. O. BOX 22742
JACKSON, MS 39225-2742**

Download this form and fill it out as a fillable form using Adobe, otherwise all entries must be typewritten. Fill in all blanks. All information must be supplied on the form. If an item is not applicable to you, complete the blank with "N/A". If insufficient space is provided for any item, attach supplemental sheets (8½" x 11").

Your signature to this form and its notarization constitutes an affidavit as to the truth of all information you have submitted.

If you are applying to be an RPG, application should be accompanied by a check payable to the Mississippi State Board of Registered Professional Geologists or MSBRPG. This will cover the application processing costs and it is non-refundable.

I hereby apply for Registered Professional Geologist (RPG) on _____, 20_____.

I hereby apply for Geologist-In-Training enrollment (GIT) on _____, 20_____.

GENERAL INFORMATION

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

Home Address: _____

City: _____ State: _____ ZIP: _____

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

Year of Birth: _____ Place of Birth: _____

Email (home): _____ Email (work): _____

Employer: _____

Employer Address: _____

Employer City: _____ State: _____ ZIP: _____

Employer Phone: _____ State of Legal Residence: _____

Have you ever been convicted of a felony or pleaded "no contest" to a criminal charge?

Yes No

If yes, explain: _____

PART A - continued

EDUCATION

List the most recent first. If more space is needed, attach a supplemental sheet. Please make sure that all information matches the information on your official transcripts.

For each college/university list:

1. Dates - from and to (show month and year).
2. College/University (list name and location).
3. Major subject.
4. Semester or Quarter hours of Geology.
5. Degree received and date - month and year.

PROFESSIONAL AFFILIATIONS

(Memberships in Professional Organizations)

REGISTRATION AND LICENSURE HISTORY

1. Do you CURRENTLY hold a state or national professional certification, license or registration (e.g. AIPG, AAPG, CPG, RPG, PG)? Yes No

List all current state and national professional licenses, certifications, and registrations. Please provide license, certification, and registration number(s) and expiration date(s):

2. Have you ever been refused professional certification, license, or registration, or the renewal thereof?

Yes No

If yes, provide details as to state, agency, or organization, professional certificate, license or registration number, date, and stated reason:_____

3. Have you ever had a professional certification, license, or registration revoked, suspended, or otherwise acted against in a disciplinary proceeding? Yes No

If yes, provide details as to state, agency, or organization, professional certificate, license or registration number, date, and stated reason:_____

PART B

EXPERIENCE RECORD

Attach a supplemental sheet(s) if necessary, list all work experience (geological and non-geological) in reverse chronological order (i.e. most recent position first), using the following format.

For each entry list:

1. Dates of qualifying experience; including graduate experience.
2. Description of qualifying experience - (please note work which you desire to be qualifying experience with an asterisk); include position title, name of employer, and as concisely as possible describe your duties, responsibilities, and supervisory role (if any). A minimum of four years of experience must be demonstrated and a minimum of three experience reference forms must be submitted.
3. Verification of work; include name, title and address of geologist who can verify the quality of your work. The self-employed may reference professional geologists familiar with their work. For GIT verification, professors or other persons in responsible positions may vouch for your class performance and ethics as demonstrated by classroom association.

Example:

1. From May 1995 to present
2. Senior Geologist; C & S Geotechnical Co., Inc.; Duties included writing proposals, well drilling and sampling plans, analysis of data derived from sampling, writing final reports, supervised 30 geologists.
3. John Doe, President, C & S Geotechnical Co., Inc., 3321 Johnson St., Sugarloaf, MS.
James Doe, Senior Geologist, C & S Geotechnical Co., Inc., 3321 Johnson St., Sugarloaf, MS
Arlo Doette, Project Geologist, Doette Drill Co., Route 19, White Valley, MS.

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PART C

AFFIDAVIT

In affixing my signature to this application, I warrant that all statements made herein and on the appended sheets are true and correct to the best of my knowledge, information, and belief. In affixing my signature to this application, I acknowledge that I read and understand the "Registered Professional Geologists Practice Act of 1997," the Rules of the Board, and shall adhere to the Code of Ethics/ Professional Conduct and all other requirements and guidelines contained therein.

Date: _____, 20____.

Signature: _____

"State of _____

County/Parish of _____

Personally appeared before me, the undersigned authority in and for the said county/parish and state, within my jurisdiction, the within named _____, who acknowledged that (he)(she)(they) has (have) sworn to, subscribed to, and executed, the above and foregoing instrument on this _____ day of _____, 20____.

Notary Public

My commission expires:

"

(Affix official seal, if applicable)

PART D – Section 1

GEOLOGICAL EXPERIENCE VERIFICATION AND REFERENCE FORM

Instructions: Applicant is to complete Section 1 and then forward Sections 1 and 2 to the Reference. Sending digital PDF copies will aid the Reference in completing Section 2. Otherwise all information is to be typewritten. Applicant must include Section 1 for each reference with their application.

Reference's Name: _____

Applicant Information

Name: _____

Address: _____

Verification of Experience From: _____ To: _____

Employer During Verification Period: _____

Employer Address/City/State: _____

Part Time: Full Time: Professional Relationship:_____

Applicant should make an explicit statement, listing and defining work performed, listing and defining projects for which applicant had full or partial responsibility.

This image shows a full page of white paper with horizontal black lines, resembling notebook paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

PART D - Section 2

GEOLOGICAL EXPERIENCE VERIFICATION AND REFERENCE FORM

Instructions: The applicant named below has filed an application for registration in the state of Mississippi as a Registered Professional Geologists. This process depends on the verification of the extent, diversity, and quality of his/her practical training and experience as described in Section 1. We therefore request your assistance by filling out the form with consideration of the need for accurate data and for objective appraisal of the applicant's ability or potential to practice geology. If the applicant has provided digital Adobe PDF copies, please download the form and complete it digitally, print, sign, and deliver it to the address below. Otherwise all information is to be typewritten. The applicant has provided in PART D-Section 1, the job/timeframe which you are to verify.

Reference must return Sections 1 and 2 to the MSBRPG, P.O. BOX 22742, JACKSON, MS 39225-2742

Applicant's Name: _____

Reference Information

Name: _____

Current Employer Name: _____

Current Employer Address/City/State: _____

Business Phone: _____ Position in Firm: _____

Are you a degreed Geologist? Geoscientist? Engineering Geologist? Other? _____

Do you currently hold a state professional certification, license or registration? Yes No

List all current state licenses and registrations. Please provide license and registration number(s) and expiration date(s):

1. Describe applicant's character and personal reputation: _____

2. What is/was your business or professional relationship to the applicant: _____

3. Do you have knowledge of the applicant's participation in professional misconduct? _____

If yes, please explain: _____

4. Would you recommend this applicant for registration? _____

5. The portion of employment or experience we wish to verify is described by the applicant in the previous section (Section 1). Please state your opinion regarding the accuracy of the description, including extent and complexity of work. _____

Reference Signature: _____ Date: _____

PART D – Section 1

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PART D - Section 2

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PART D - Section 2

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