



State of New Hampshire
OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION
DIVISION OF LICENSING AND BOARD ADMINISTRATION
7 Eagle Square, Concord, NH 03301-2412
Phone: 603-271-2152

REINSTATEMENT APPLICATION
\$510.00 Reinstatement fee

1. General Information

Name _____
Last First Middle

Names Previously Used (if applicable) _____

Residence Address _____ zip code _____

Business Name _____

Business Address _____
Indicate mailing address by check box zip code _____

Business Phone _____ Home Phone _____

Email _____ License # _____

2. General Information Questions

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1. Have you ever been convicted of any felony or any misdemeanor, or a violation involving geology or the practice of professional geology. If so, name the court, the details of the offense and the date of conviction and the sentence imposed. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you ever lost or been denied registration/licensure as a professional geologist or disciplined by another licensing board in any other state and if so, an explanation of the circumstances? | <input type="checkbox"/> | <input type="checkbox"/> |

If the answer is yes to any of the above questions, submit a written explanation with your application

3. References of Character and Qualifications

Applicant will give the names, complete addresses, occupation and business relationship with applicant of 3 references from licensed professional geologists as defined by RSA 310-A:118, IV

Name	Address including zip code	Occupation/License	Business Relationship to Applicant

4. Continuing Education Activity Log

Complete the continuing education activity log and **include it** with your completed reinstatement application. An applicant may bring an inactive status by obtaining 12 additional continuing education hours for a **total of 36**. Proof of compliance must be retained for 3 years pursuant to Administrative Rule Geo. 403.07 (c) for random audit verification. **Incomplete activity logs will result in return of your reinstatement and delay in processing of the reinstatement of your license. Add additional log sheets if necessary.**

<u>LICENSE EXPIRATION DATE</u>		NAME:	
From:	To: PRESENT	GEO LICENSE NO:	
	Date(s) or Date Range	Nature of Activity and Sponsoring Organization	CEH's for this Activity
			Cumulative CEH's for

Include additional pages if necessary


5 Affidavits

RULES OF PROFESSIONAL CONDUCT

I certify to the best of my understanding, knowledge and belief that I have adhered to and agree to abide by the ethical and professional standards of New Hampshire Code of Administrative Rules Geo 500; and

CONTINUING PROFESSIONAL DEVELOPMENT

I attest that the information contained in this form and the above continuing education activity log is true and correct to the best of my knowledge and belief and complies with the minimum of 36 approved continuing education hours required by Geo 403.04. I further acknowledge that the provision of false information in the application is a basis for disciplinary action by the board:

 **SIGN HERE** _____

ADDRESS ALL COMMUNICATIONS TO:

NH OPLC – BOARD OF PROFESSIONAL GEOLOGISTS
7 EAGLE SQUARE
CONCORD, N.H. 03301

Find us on the on-line at <https://www.oplc.nh.gov/board-professional-geologists>

THE STATE OF NEW HAMPSHIRE
BOARD OF PROFESSIONAL GEOLOGISTS
7 EAGEL SQUARE
CONCORD, NEW HAMPSHIRE 03301

Dear Sir/Madam:

An individual has applied to this Board for reinstatement of their license in the State of New Hampshire as a Professional Geologist and either has given your name as a reference or has stated that he/she has worked for you or with you. The Board will appreciate your sending the information requested on the reverse hereof, and assures you that such information as you give will be treated in the strictest confidence.

The Board is required by law to obtain evidence of the good character of the applicant and his/her qualifications as a Professional Geologist before issuing a certificate of licensure. Statements made on this form by responsible persons with actual knowledge of the applicant's character and qualifications will be considered by the Board as evidence and filed with the application.

The Board urges that evidence submitted on this form not be perfunctory, but be considered carefully. The Board, in making decisions, must rely to a great extent on the evidence submitted by references. Since these decisions may affect the life, health, property and welfare of the public, you have a grave responsibility to provide the Board with a fair and honest appraisal of the applicant.

Since the Board cannot reinstate the license of the applicant until the references are returned, a prompt reply will expedite consideration of the applicant's request for reinstatement. Please make sure that you enter the licensee's name on the reference form.

Very truly yours,



Dawn Couture
Board Administrator II

Re: Application of _____

(NAME IS REQUIRED)

THIS IS CONFIDENTIAL INFORMATION - FOR USE OF BOARD MEMBERS ONLY

1. What is your full name _____
(to be typewritten or printed)
2. What is your address _____
(street and number) _____ (city or town)
3. What is your present business or profession? _____
4. Are you a licensed Geologist? _____ In what State? _____ License # _____
- 4a. If not, do you qualify for licensure as a Professional Geologist in accordance with RSA 31-A:125 I?
Yes No
5. How long have you known the applicant? From _____ To _____
6. Are you in any way related to the applicant? _____
7. What has been your business connection with the applicant? _____

8. Do you know anything reflecting adversely on the integrity or general good character of the applicant?

9. Please give a brief estimate of the applicant as an geologist. _____

10. Would you employ the applicant in a position of trust? _____
11. If the applicant is connected with a firm, please provide its name and address.

12. Is the applicant qualified to be placed in responsible charge or supervision of work? _____
13. If the applicant is in individual practice, please indicate the nature of such practice _____
14. Do you recommend the applicant for licensure as a Professional Geologist? _____
15. In my opinion the applicant has _____ years of geologist experience.
16. Remarks concerning the applicant _____

I make the above statements with full knowledge that the person referred to is making application for licensure to the State of New Hampshire as a Professional Geologist.

Date _____

Written Signature _____

Reference Form Attachment B

310-A:125 Requirements for Licensure as a Professional Geologist.

I.(a) Applicants for licensure as a professional geologist shall meet the ethical standards set forth in this subdivision and shall have committed no misconduct as set forth in RSA 310-A:133, II. In addition, each applicant shall have a bachelor's degree in geology or a bachelor's degree in a related field which included 30 credit hours or 45 quarter hours in geology from an accredited 4-year college, or a master's or doctoral degree from an accredited graduate program in geology, including but not limited to degrees or credit hours in geochemistry, geohydrology, geomorphology, geophysics, groundwater geology, hydrogeology, hydrology, marine geology, mineralogy, mining geology, paleontology, petrography/petrology, sedimentology/stratigraphy/historical geology, or water resources studies; and shall present evidence suitable to the board of at least 5 years of experience in the practice of geology, of which at least 3 years must have been under the supervision of a licensed professional geologist or a geologist who otherwise meets the requirements of a licensed professional geologist as determined by the board. Applicants meeting these ethics, education and experience requirements shall be eligible to sit for an examination to be administered by the board. Unless otherwise provided, applicants shall take the examination and receive a passing score.

(b) Experience in the practice of geology, obtained before the expiration of the period described in paragraph II of this section, may count towards the experience in the practice of geology under the supervision of a professional geologist required in subparagraph I(a) of this section if the supervising geologist met the education and experience qualifications of paragraph II at the time of the relevant experience. For purposes of this section, experience in the practice of geology does not include routine sampling, laboratory work or geological drafting.

(c) A completed academic year of graduate study in geology may be applied either towards a year of the experience requirement of this section up to a total maximum of 2 years, or to the education requirement of this section, but not both.

(d) A completed academic year of college or graduate level teaching in geology may be applied towards a year of the experience requirement of this section.