





## 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 – TECHNICAL DIVISION  
121 SOUTH FRUIT STREET, SUITE 201  
CONCORD, N.H. 03301

*Find us on the on-line at [www.oplc.nh.gov/geologists/index.htm](http://www.oplc.nh.gov/geologists/index.htm)*

rev. 10/16

THE STATE OF NEW HAMPSHIRE  
BOARD OF LICENSURE  
FOR PROFESSIONAL GEOLOGISTS  
121 SOUTH FRUIT STREET, SUITE 201  
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,

A handwritten signature in cursive script that reads "Dawn Couture". The signature is written in black ink and is positioned to the left of the typed name below.

Dawn Couture  
Supervisor 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.

**Credit Card Sheets are not accepted via e-mail.**

**You may pay your fee with a credit card by filling out this form. Please make sure that all information is correct and up to date. Indicate what the fee is for under transaction type.**

Fax: 603-271-7928

**This page will be destroyed after the transaction has taken place.**

Transaction Type:		Amount Due:	
Card Type: (please select one) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <b>(required)</b>			
Card Number			<b>(required)</b>
Expiration Date:	Month:	Year:	<b>(required)</b>
Billing Name and Address (your billing address must match the address associated with the credit card you are using.)			
Name on Card:			
Billing Address:			
City:			
State/Province:			
Zip/Postal Code:			
Country:			
Authorization Signature :			