

1. General Information

Name		
Last	First	Middle
Names Previously Used (if a	pplicable)	SS#
Written Signature:		
Business Name & Position		zip code
Business Address		
	Indicate mailing address by check	box zip code
Business Phone	Personal P	hone
Email:	Social Sec	urity Number:
Place of Birth	Date of Bin	rth
	2. Registration/Licensure In	formation
State in which first registered	l or certified as a Natural Scientist A	Apprentice:
Certified as a Wetland or Soi	Il Scientist Apprentice?	
Date of Certification	Certificate Number	Certified by examination?
Is Certificate still in force?	If not why?	
3. Me	embership in Professional or S	Scientific Associations

Name of Organization	Location	Grade or Membership	Date

4. Professional Experience

This information described below is a summary of your employment, and should start with your first employer.

Date	1. Name of Employer- Title of Position	Name and present address of someone familiar with each position, preferably		
Indicate years	2. Location and Character of Each Position	person to whom applicant reported or with whom he/she was associated.		
From to	3. Degree of Responsibility	-		

5. Education

1. Official transcripts are required and must be sent directly to the board office from the college or university, in a sealed envelope.

INSTITUTION AND LOCATION	FROM	ТО	GRADUATION DATE	CREDITS COMPLETED
Colleges and Universities:				
1.				
2.				
3.				
4.				

2. Please list home study and correspondence school courses related to soil or wetland science if applicable. Attach additional sheets if necessary. Please attach all certificates of completion.

COURSE TITLE	COURSE DATES		COURSE DATES EDUCATIONAL		EDUCATIONAL	SEMESTER HOURS	
	ТО	FROM	INSTITUTION	AWARDED			

6. Name of Apprenticeship Supervisor(s)

Name	Certificate Number

7. General Information Questions

1. Have you ever been convicted of any felony or misdemeanor that has not been annulled by a court pursuant to RSA 651:5 and if not annulled, the name of the court in which the conviction occurred, the Details of the offence and the date of the conviction and the sentence imposed.

2. Have you ever been denied registration, certification or licensure as a soil or wetland scientist or disciplined by this board or another soil or wetland scientist board in any other state or country and if so, an explanation of the circumstances

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

Yes	No

8. Affidavits

I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the certificate of licensure, as applied for, but also to the retention of said certificate, if issued.

Signature of Applicant

Date

ADDRESS ALL COMMUNICATIONS TO:

NHOPLC – Technical Division 7 EAGLE SQUARE CONCORD, N.H. 03301

Find us on the on-line at https://www.oplc.nh.gov/board-natural-scientists

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CANDIDATE REQUIREMENTS

310-A:85 Apprentice.

I. To be eligible for recognition as an apprentice soil scientist, a person shall have the following qualifications:

(a) Be of responsible character;

(b) Have completed the formal education under RSA 310-A:84, I; and

(c) Be in training to become a certified soil scientist and be engaged in the practice of soil science under the direct supervision of a certified soil scientist who is performing soil science work.

II. To be eligible for recognition as an apprentice wetland scientist, a person shall have the following qualifications:

(a) Be of responsible character;

(b) Have completed the formal education under RSA 310-A:84, II-a; and

(c) Be in training to become a certified wetland scientist and be engaged in the practice of wetland science under the direct supervision of certified wetland scientists who is performing wetland science work.

Date

College or University Registrar

Dear Registrar:

Enclosed please find my fee in the amount of \$	in payment for	a certified transcript of my scholas	tic
record. I attended college during the years	to	. I received my degree on	<u> </u>
My Social Security number is	and my date of birth is _	<u> </u>	

My student identification number was______.

Please send the transcript *directly* to the following address:

NHOPLC – Technical Division 7 Eagle Square Concord, NH 03301

The Board of Natural Scientists has informed me that they will treat the transcript in accordance with the provisions of the Education Rights Privacy Act and that no unauthorized person will have access to the transcript.

Sincerely,

(Signature)

(Printed Name and Address)