



North Carolina Board for Licensing of Geologists

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CONFIDENTIAL REFERENCE FORM

To be completed by applicant.

Applicant's Full Name: _____

I waive my right to inspect the contents of this document.

Signature: _____ Date: _____

The above named applicant has applied to the North Carolina Board for Licensing of Geologists to become licensed as a geologist in North Carolina under the provisions of Chapter 89E of the General Statutes. As part of the licensing process, the Board requires professional references to demonstrate the character, reputation, responsibility, integrity and competence of the applicant. These reference forms must be submitted by licensed geologists, qualified geologists or licensed professional engineers.

This form has been supplied to you by the applicant, however, you are requested to mail or email the completed form directly to the Board. The information will be treated as strictly confidential.

*Note: A "qualified geologist" is a person who possesses all the qualifications specified for licensing in Chapter 89E of the North Carolina General Statutes except that he or she is not licensed.

1. Your profession: _____
2. Years of experience: _____
3. Specialty (if any): _____
4. Please list below all professional licenses/registrations you currently hold. Include the license number and state in which each license is held.

5. How long have you known the applicant?
 - a. Personally: _____
 - b. Professionally: _____

6. What has been your professional relationship with the applicant?

- Employer Supervisor
 Coworker Other: _____

7. Please indicate your appraisal of the applicant in the categories listed below.

	Excellent	Good	Poor	Unknown
Technical Competence				
Professional Integrity				
Professional Reputation				
Personal Integrity				

8. Do you know of any instances where the applicant was guilty of illegal conduct or professional misconduct?

- Yes No If YES, explain below or on a separate sheet.

9. Would you trust the applicant with responsibility for an important geologic project involving the life, property, health and welfare of the public?

- Yes No If NO, explain below or on a separate sheet.

10. Additional information and comments, which would amplify or clarify the items above and thus assist the Board in evaluating the applicant's experience and qualifications are strongly requested. Attach additional sheets if desired.

Signature: _____ Date: _____

Name and Title: _____

Email Address: _____

Seal

Firm: _____

Location: _____

* If you are a licensed professional, please affix your seal in the space provided.