

Nebraska Board of Geologists

Mail to: PO Box 94844 Lincoln, NE 68509-4844 Delivery: 215 Centennial Mall S, Suite 400 Lincoln, NE 68508 Phone: 402-471-8383 Fax: 402-471-0787

Questions? Contact us at nebog.board@nebraska.gov or nebog.nebraska.gov

VERIFICATION OF LICENSURE/EXAMINATION OF A GEOLOGIST

- Section I is to be completed by the applicant.
- Forward this form to the appropriate licensing board who will complete Section II
- The form is to be returned directly to the Nebraska Board using the contact information above. If a verification is emailed or faxed, an original hard copy is not required.
- Some jurisdictions may charge a fee for this service and processing times may vary. You will need to contact the verifying jurisdiction to confirm whether a fee is required and instructions for submitting the request.

SECTION I: APPLICANT INFORMATION							
NAME					LAST 4 DIGITS OF SSN		
ADDRESS (STREET, CITY, STATE, ZIP)							
SECTION II: VERIFICATION OF LICENSURE OR EXAMINATION							
FROM (STATE BOARD NAME)					DATE		
ADDRESS					I		
1. THE ABOVE-NAMED PERSON IS OR WAS REGISTERED/LICENSED AS A:	Certificate or License Number		Date Issued		Valid Until		
GEOLOGIST INTERN (GIT)							
PROFESSIONAL GEOLOGIST (PG)							
2. BASIS OF LICENSURE/REGISTRATION							
	Result	ASBOG Exam? (Yes / No)		Exam	Date		
FG							
PG							
B. GEOLOGIST INTERN/PROFESSIONAL GEOLOGIST ACCEPTED FROM:							
D. 🗆 OTHER:							
3. DENIAL, INVESTIGATIONS AND/OR COMPLAINTS:							
A. Has the above-named individual ever been denied registration in your state? (if yes, please give details in REMARKS or on reverse)					□ Yes	s 🗌 No	
B. Has a complaint been filed or has formal disciplinary action ever been taken against the above-named individual? (If yes, please give details in REMARKS or on reverse)				□ Yes	s 🗌 No		
5. REMARKS:							
6. VERIFIED BY:							
NAME			BOARD SEAL				
	DATE		-				
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