

**ALABAMA BOARD OF LICENSURE  
FOR PROFESSIONAL GEOLOGISTS**

2740 Zelda Road, Box #5  
Montgomery, AL 36106

**FORM FOR PROFESSIONAL REFERENCE**  
(THREE REQUIRED)

NAME AND ADDRESS _____ OF APPLICANT _____ _____
I WAIVE MY RIGHT TO INSPECT THE CONTENTS OF THIS DOCUMENT
SIGNATURE _____ DATE _____

TO BE COMPLETED BY THE APPLICANT

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TO BE COMPLETED BY RESPONDENT

The above named applicant has applied for licensing as a geologist in Alabama under the provisions of Title 34, Chapter 31 of the Alabama Code, 1975. The Alabama Board of Licensure for Professional Geologists requires, as part of the licensing process, references to satisfy the Board as to the character, reputation, responsibility, integrity and competence of the applicant. These references must be submitted by a licensed geologist, qualified geologist<sup>1</sup> or professional engineer under whom the applicant has worked. **PLEASE TYPE OR PRINT NEATLY.**

This form has been supplied to you by the applicant. You are requested to mail the completed form directly to the Board. Information will be treated by the Board as strictly confidential. Your candid appraisal of the applicant's professional competence is appreciated.

1. Your name: \_\_\_\_\_
2. Your address: \_\_\_\_\_  
\_\_\_\_\_
3. Your telephone no.: \_\_\_\_\_
4. Your profession: \_\_\_\_\_
5. Your years of experience: \_\_\_\_\_
6. Your specialty (if any): \_\_\_\_\_

1 - Note: A "qualified geologist" is a person who possesses all the qualifications specified for licensing under Title 34, Chapter 41 of the Code of Alabama, 1975, except that he/she is not licensed.

**THIS FORM MAY BE DUPLICATED AS NECESSARY**

7. Your professional registration/license/certification:  
 a. Type (engineer/geologist): \_\_\_\_\_  
 b. State: \_\_\_\_\_  
 c. Registration/Certification No.: \_\_\_\_\_  
 d. Date of issue: \_\_\_\_\_

8. How long have you known the applicant:  
 a. Personally: \_\_\_\_\_  
 b. Professionally as a practicing geologist \_\_\_\_\_

9. What has been your professional relationship with the applicant?  
 Employer                       Supervisor  
 Co-worker                       Other

10. Please indicate your appraisal of the applicant in the following categories:

	Excellent	Good	Poor	Unknown
a. Technical competence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Professional integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Professional reputation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Personal integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Do you know of any instances where the applicant was convicted of illegal conduct professional misconduct?     Yes                       No  
 If "yes", please explain on separate sheet

12. Would you entrust the applicant with responsibility for an important geologic project involving the life, health, property and welfare of the public?     Yes                       No

(If "No", please explain. Please consider this question carefully. As a licensed professional, the applicant will represent all geologists working in the public sector.)

13. 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 pages as required.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_