



For office use only
Application number _____
Date _____, _____

New Jersey Office of the Attorney General
 Division of Consumer Affairs
 State Board of Professional Engineers and Land Surveyors
 P.O. Box 45015, Newark, New Jersey 07101
 (973) 504-6460

Land Surveyor-in-Training Reference Form

(Please print clearly.)

Name of Reference

Name of Applicant

Last name	First	Middle
Street address		
City	State	ZIP code

Last name	First	Middle
Street address		
City	State	ZIP code

The applicant for certification as a land surveyor-in-training whose name and address are given above has sent you this reference statement regarding his/her professional qualifications. He/she indicated that you have personal knowledge of his/her character and professional experience.

Please answer the following questions and return this form to the State Board of Professional Engineers and Land Surveyors, P.O. Box 45015, Newark, N.J. 07101.

Statement of Reference *(From your own personal knowledge.)*

1. Your business or profession: _____ 2. Length of acquaintance: _____
3. Relationship, if any: _____ 4. Applicant's moral habits or character: _____
- _____
5. Applicant's general reputation in the community: _____
- _____
6. If you have been associated with the applicant in professional practice, please supply the following information.
 Position held by the applicant: _____
 Character of the work performed by the applicant: _____
- _____
- _____
7. In view of your knowledge of the applicant, do you recommend him/her for a certificate of registration as a land surveyor-in-training? Yes No

Date	Name (please print)
	Signature

If you are a professional land surveyor, please give your license number: _____, _____ .
State of licensure