PROFESSIONAL ENGINEER/LAND SURVEYOR EXAMINATION SCHEDULING FORM FOR THE DISTRICT OF COLUMBIA

SEE INSTRUCTIONS ON BACK OF THIS FORM BEFORE COMPLETING.

1. _____ Social Security Number
   _____ Date of Birth
   _____ Telephone Number (Day)

   _____ Last Name
   _____ First Name
   _____ Middle Name

   _____ Mailing Address
   _____ Maiden Name

   _____ City
   _____ State
   _____ Zip Code
   _____ Discipline (PE Candidates Only)

   _____ E-mail Address

2. When did you file your original licensure application Accommodations with the District of Columbia Board?

   _____ Month and Year

   ☐ Disabled: I will need special arrangements (Explain on a separate sheet of paper)

3. Indicate the date you are taking the exam:

   ___ APRIL _____ Year
   ___ OCTOBER _____ Year

4. Is this your first writing in D.C. of the exam for which you are applying?

   ☐ Yes (New Candidate)
   ☐ No (Re-examinee)

5. SITE: ___ DC Area

6. Place passport-style photo in space provided be below:

   (The photo should be no larger than 2" by 2" and no smaller than 1.5" by 1.5".)

7. Check the appropriate boxes below for 1) the examination you will taking and 2) whether it will be your first exam or a re-exam.

   A. ☐ PE – P & Practice of Engineering ☐ **Exam** ☐ **Re-Exam**

   B. ☐ LS – P &P of Land Surveying ☐ **Exam** ☐ **Re-Exam**

8. Sign and date below:

   Date: _____ Signature: _____

   Please complete and return this form to the following address:

   Pearson VUE
   Dept. DC-EN
   Metro-Plex II, Suite 400
   8201 Corporate Drive
   Landover, MD 20785

Stock #6809-38 3/07