WASHINGTON STATE DEPARTMENT OF LICENSING

Geologist License Application

Apply for a geologist license.

Online: https://professions.dol.wa.gov

Or mail your application and fee to:

Geologist Licensing Board
Department of Licensing
PO Box 35001
Seattle WA 98124-3401

Mail all other supporting documents to:

Geologist Licensing Board
Department of Licensing
PO Box 9012
Olympia WA 98507-9012

For questions or language help call: 360.664.1497

Geologist license requirements

To be licensed in Washington as a geologist, you must:

- Have a degree from an accredited college or university in geological sciences or a related degree as approved by the Board. Your degree must include 24 semester or 36 quarter hours of upper division geology courses or course work educationally equivalent in content and rigor as approved by the Board. For more detail on required course work, visit https://www.dol.wa.gov/business/geologist/.
- Have at least 5 years of documented, verifiable professional geological experience. At least 3 years must be under the supervision of a licensed geologist.
- Pass the National Association of State Boards of Geology (ASBOG®) Fundamental of Geology and Practice of Geology examinations, or an examination the Board approves as equivalent.
- Be currently licensed in another state, if applying by reciprocity.

Alternative experience credit

- One year of full-time graduate study in geology or a qualified related area counts as one year of experience, up to a maximum of 2 years.
- Geological research or teaching at the university or college level is credited year for year if, in the judgment of the Board, it is comparable to experience obtained in the practice of geology or a specialty.

How to apply for a license

1. Submit a completed Geologist License Application (sections 1 through 5) with a check or money order payable to the Department of Licensing to our office.
2. Complete the Applicant Information section of the Employment and Experience Verification form send to each of the verifiers listed on section 4 of this form. The person verifying will send the completed form directly to our office. **Employment and Experience Verification is not required if you are only applying for the Fundamentals of Geology Exam**.
3. If you have only one Employment and Experience Verification, complete the Applicant portion of the Personal Reference form and send to your reference to complete and submit to our office.
4. Request a certified copy of your transcript(s) be sent to our office. **Only sealed transcripts sent directly from the issuing college or university are accepted.** Educational equivalents are subject to approval and must be documented by providing a course syllabus, outline, or certificate of completion for non-academic courses.
5. After you are approved by the Board to take the ASBOG® exams, you will receive a copy of the ASBOG® National Examination Candidate Request Form from our office. Complete the lower section of the form and send it with the exam fees directly to ASBOG®. Exam admission letters for approved candidates will be sent approximately one month prior to the date of the exam.
6. **Reciprocity applicants only:** Complete the Applicant section of the Geologist Licensing and/or Exam History Certification and send to the state where you are currently licensed. They will complete the Certification Verification section and return the form to our office.

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Geologist License Application

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29940-APPLICATIONS

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Geologist Licensing Board
Department of Licensing
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Seattle WA 98124-3401

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All applicants must pay the non-refundable application fee to take an exam.

Fees

Geologist ☐ by exam, **$135 fee**
☐ by reciprocity, **$270 fee**

Licenses are available for self-printing with an online account.
If you want us to print and mail your license add a $5 print fee for each copy to your payment.
☐ $0 self-print license online.
☐ $5 each. DOL print and mail license. Quantity_____ Total $_____

Personal information

TYPE or PRINT Name as you would like it to appear on your license			Former name *(If applicable)*
Full legal name (First, Middle, Last)			
Street address			
City	State	ZIP code	County
10-digit daytime phone number	10-digit home phone number *(optional)*	Date of birth *(mm/dd/yyyy)*	
Social Security number* (or ITIN, Green Card, Canadian SIN)	Email		

Military? *(check if applicable)*
Current or former: ☐ Military member ☐ Military spouse or domestic partner

For Service members and their spouses: When a Service member and their spouse must move due to Military orders, Washington state may recognize their current license or certificate if they provide the following:

1. A copy of the military orders.
2. A license that is in good standing in all states where the individual held their license before.
   a. During application review, DOL may request an original Certificate of Licensure or Letter of Good Standing from each state.
   b. There may be continuing education requirements needed for DOL to recognize the license.

*You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have a SSN, ITIN, or TIN, leave that section blank. If you do have a SSN, ITIN, or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

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Personal information *(continued)*

3. Complete the following table if you hold a license in any state (excluding Washington).

State	License number	Expiration date *(mm/dd/yyyy)*

If you are applying by **reciprocity**, indicate the state where you passed an exam for licensure.

Exam state	License state	Date of original license	License number

Education background *(attach additional sheets if required)*

Name of college, university, technical school	Location	Dates of attendance From	To	Degree
Applicable education and supplemental training	**Location**	**Date of attendance From**	**To**	**Certificate or Degree etc.**

Legal background

Answer the following

Answer the questions below. If you answer "Yes," attach a detailed explanation.

1. Within the last 5 years, in this state or any other jurisdiction, have you had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit held by you? . . . . . ☐ Yes ☐ No
2. Within the last 5 years, in this state or any other jurisdiction, have you defaulted, or been convicted of, or entered a plea of no contest to a gross misdemeanor or felony crime? (Don't include traffic convictions.) . . . . . ☐ Yes ☐ No

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Qualifying experience–List in chronological order *(most recent first)*

Include only **practical work experience** performing activities involved in the practice of **geology**. A resume alone is not enough.				
Full name and complete current address of employer, including self employment and military service	**Period of employment (month/year)**	**Total hours worked per week**	**Nature of service performed List types of projects, major duties**	**Verifier name and title**
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If additional space is required, please attach an 8 1/2" x 11" sheet.

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Certification

Answer the following

1. Do you agree to abide by all the applicable laws and rules regarding the practice of geology and geology specialties? . . . . . ☐ Yes ☐ No
2. Do you authorize any business associates (past and present) and any governmental agencies (local, state, or federal) to release to the Department of Licensing any information, files, or records which may be required for a background investigation? . . . . ☐ Yes ☐ No
3. Do you understand that if you provide any false information in this application we may deny, suspend, or revoke your license to practice in Washington? . . . . . ☐ Yes ☐ No

Applicant signature–Sign and date the declaration below.

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.

TYPE or PRINT Name

X When completed, print form and sign here.

Applicant signature

Date and place (city or county) signed

! Providing false information in this application may be cause for denial, suspension, or revocation of your professional license in the State of Washington.