Secretary of State
Office of Professional Regulation

ENGINEERS
Engineer Intern Employer Reference Form

(TO BE COMPLETED BY APPLICANT)

Applicant's Name:
Name of Firm:
Address of Firm:
Description of Work Performed: DATES: From: To:

Attach separate sheet(s) as necessary

Applicant's certification:

I certify that the work described above is an accurate account of work I performed at this firm.

_____ _____
Signature of Applicant Date

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TO BE COMPLETED BY THE EMPLOYER/SUPERVISOR

Are you a Registered/Licensed Professional Engineer? Yes No

Indicate State and License No.

COMMENTS:

I certify that the statements on this form accurately reflect the work accomplished by the applicant while in my employ/supervision and that my certification is not made for the purpose of aiding an unqualified applicant to become licensed, but with full realization of the responsibility toward the public where the safeguarding of life, health, and property is concerned or involved.

Signature of Employer

Date