



**NORTH CAROLINA BOARD OF EXAMINERS  
FOR ENGINEERS AND SURVEYORS**

4601 Six Forks Road, Suite 310

Raleigh, North Carolina 27609

Tel: (919) 791-2000

[www.ncbels.org](http://www.ncbels.org)

**Name and address of Reference**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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**Applicant**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

The above named applicant has applied to this Board for certification as an "Engineer Intern" under the provisions of Chapter 89C of the General Statutes of North Carolina.

The Board requires that the applicant submit evidence of education and/or experience in engineering work, of a progressive nature and level acceptable to the Board, in addition to successfully completing the required examination. The Board also requires that the applicant submit the names of individuals who are thoroughly familiar with the applicant, and who are willing to give conscientious and accurate testimony concerning education, experience, competency and character.

The applicant has informed this Board that you are familiar with his/her character, reputation and general ability and are in a position to validate the extent of the applicant's responsibility in engineering work with which the applicant has been connected if applicable.

In light of the above, the Board of Examiners solicits your assistance in determining the applicant's fitness for certification as an Engineer Intern by answering frankly, carefully and fairly, and to the degree commensurate with your thorough knowledge of the applicant's demonstrated ability, the questions on the following page.

**Please submit this form directly to the Board in a sealed envelope with your signature on the back flap.**

**Note: Reference forms are not acceptable by e-mail. Family and current Board members cannot be references.**

## INFORMATION CONCERNING ENGINEER INTERN APPLICANT

Applicant's Name \_\_\_\_\_

1. What is your personal and/or business relationship to the applicant? \_\_\_\_\_

2. As a reference for this applicant, state your profession. \_\_\_\_\_

3. In what states are you licensed to practice engineering? \_\_\_\_\_

4. I have known the applicant personally and have knowledge of the candidate's engineering work (give month and year):

From \_\_\_\_\_ To \_\_\_\_\_

5. In your opinion, has the applicant had sufficient responsibility in: ☐ Design ☐ Production ☐ Supervision ☐ other to justify certification as an Engineer Intern?

6. Indicate your opinion as to the applicant's potential to practice engineering by placing an "X" in the appropriate spaces below. If an "Inadequate" box is checked, please attach a note of explanation to this form.

PHASE OF ACTIVITY	EXCELLENT	GOOD	SATISFACTORY	INADEQUATE	UNKNOWN
Technical competence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Do you know of any instance where the applicant was guilty of unethical or illegal conduct?

8. Would you entrust the applicant with responsibility for an important engineering project involving the welfare and safety of the public?

9. Would you recommend the licensure of applicant when experience and examination requirements have been satisfactorily completed?

10. Please state other pertinent information regarding the applicant.

11. Did you authorize the applicant to use your name as a reference? ☐ Yes ☐ No

Additional information in letter form which would clarify and assist the Board in evaluating the applicant's experience record is solicited. If you object to the applicant being certified, you should be willing to give testimony to support denial of certification by the Board.

**Note: Reference forms are to be returned in a sealed envelope with signature over the flap.**

**Reference forms are not acceptable by fax or e-mail.**

**Digital signature is not acceptable.**

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

If Professional Engineer, State of licensure \_\_\_\_\_ License No. \_\_\_\_\_

(SEAL)

(If Professional Engineer)