

South Carolina Department of Labor, Licensing and Regulation
Board of Registration for Geologists

Synergy Business Park
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Phone: (803) 896-4800 FAX: (803) 896-4484
Internet Address: www.llr.state.sc.us

VERIFICATION OF LICENSURE

To be completed by Applicant:

Name: _____ Social Security (Last Four): XXX-XX- _____

To Be Completed by Responding Board:

Our records show the applicant named above:

1. Was registered on (date): _____
2. Registration number: _____
3. Now holds a valid registration which will expire on: _____
4. Held a valid registration which expired on: _____
5. Was found to be qualified for registration on the basis of:

() Our written exam: passing score: _____ applicant's score: _____

Is it your opinion that your state examination is equivalent to the National Examination (ASBOG)? _____

() Oral exam

() National Examination:

() Fundamentals of Geology () Principles and Practice of Geology

() Education _____ years; and experience of _____ years.

() Comity/Reciprocity with _____
(state)

() Grandfather clause in our law

() Other _____

Date _____

Signed _____

Title _____

(SEAL)

Address _____

Telephone _____

Please submit this form to the Board at the above address.