

# Wisconsin Department of Safety and Professional Services

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## EXAMINING BOARD OF ARCHITECTS, LANDSCAPE ARCHITECTS, PROFESSIONAL ENGINEERS, DESIGNERS, PROFESSIONAL LAND SURVEYORS, AND REGISTERED INTERIOR DESIGNERS

### ENGINEER-IN-TRAINING APPLICANT APPRAISAL FORM

Applicant's Name:	<input type="text"/>		
Date of Birth:	/	/	Application Number:

**Note to Applicant:** Provide replies from three (3) registered Professional Engineers having knowledge of your experience. Family members can act as supplemental references in support of an application, but not as one of the 3 required responses. Type or print your name in the box at the top of each form prior to distribution. **Forms must be uploaded by you into your LicenseE online application, <https://license.wi.gov/>.**

**Instructions:** The applicant named above has applied for certification as an Engineer-in-Training to practice in the State of Wisconsin. To assist the Board in reviewing the applicant, we would appreciate your appraisal of the applicant's proficiency as requested below.

1. **I know this applicant:**  Very Well  Well  Slightly  Not at all

2. **My contacts with the applicant extend:** From: / / To: / /

3. **These contacts were:** (check all that apply)

- As an associate in engineering work  As a student in my classes  
 In social or community activities  In professional society activities  
 Other (specify)

4. **In my opinion the applicant's personal integrity and character:**

  

<u>Type of Practice</u>	<u>High Grade</u>	<u>Average</u>	<u>Mediocre</u>	<u>Unsatisfactory</u>
Major Design	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsible Charge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subordinate Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Interpretations:

**High Grade:** Performance unquestionably of a professional level demonstrating thorough competence and creative ability.

**Average:** Work not distinguished in content or level but adequate for engineering purposes indicating an ability, under some supervision, to produce workable designs or systems and products.

**Mediocre:** Barely adequate performance, needing careful checking and rather close supervision to meet requirements.

**Unsatisfactory:** Work of poor quality, not up to minimum professional standards. Requires review and revision by associates or supervisors before execution. Inadequate for "the purpose of safeguarding life, health, and property."

5. **Registration in Wisconsin is not by classification of any branch of engineering practice. To assist the Board in evaluating this applicant, indicate the category(s) in which you have knowledge of the applicant's experience.** (Check all that apply.)

- Civil  Electronic  Metallurgical  Structural  Chemical  
 Mechanical  Industrial  Other

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6. In my opinion, this applicant is qualified to be certified as an Engineer-in-Training.  Yes  No
7. Provide comments on your overall recommendation of the applicant. (This section must be completed.)

8. The information on this form is being submitted by:

Name

Firm

Title/Position

Address (street, city, state, zip code)

Daytime Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Signature (If unable to provide a digital signature print and sign form.)

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

**Affix seal or  
Indicate where registered, type of profession, and  
registration number below: (if applicable)**