STATE OF WISCONSIN DEPARTMENT OF SAFETY & PROFESSIONAL SERVICES

AFFIDAVIT OF NON-PRACTICE
FOR PROFESSIONAL ENGINEER RENEWAL APPLICANTS
SEEKING CONTINUING EDUCATION WAIVERS
PURSUANT TO A-E 13.08

STATE OF WISCONSIN )
COUNTY OF _______________ ) SS.

I, __________________________________________ (print name), do solemnly swear or affirm
Under penalty of perjury that:

I am a registered Professional Engineer in the State of Wisconsin, registration number
_____________________________.

I make this Affidavit in conjunction with my request to renew my credential for the biennium running from August 1, 2018 to July 31, 2020 without having first met the continuing education requirements for the biennium which ran from August 1, 2016 to July 31, 2018.

I am seeking a waiver of the continuing education requirements because I am currently not practicing, or presently intend to no longer practice engineering in the State of Wisconsin during the biennial period running from August 1, 2018 and ending July 31, 2020.

That in exchange for such a waiver, I do acknowledge, affirm and agree as follows:

Pursuant to Wis. Stat. s. 443.02(2), no person may practice professional engineering in this state unless the person has been duly registered, is exempt under s. 433.14 or has in effect a permit under s. 443.10(1)(d).

During the biennial period noted in paragraph 3, above, I will not practice professional engineering (as defined in Wis. Stats. s. 443.01(2)) in the State of Wisconsin, whether for compensation or for no compensation.

If at any time during the biennial period noted in paragraph 3, I choose to resume practicing as a professional engineer in Wisconsin, the waiver will become null and void and I must first comply with the continuing education requirements set forth in Wis. Admin. Code ch. A-E 13 for the prior biennium and submit proof of compliance to the Department so that my licensure status can be noted accordingly.

#30350EE (5/18) Ch. A-E 13.08 Wis. Admin Code

Committed to Equal Opportunity in Employment and Licensing

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That by signing this Affidavit, I acknowledge and agree that if I practice professional engineering in the State of Wisconsin during the biennial period noted in paragraph 3 without first complying with the continuing education requirements, my license (no., ______________) may, in the discretion of the Section or its designee, be suspended without further notice or hearing until I have complied with the requirements of paragraph 4 of this affidavit and may further subject me to additional discipline, including revocation of registration pursuant to Wis. Stat. s. 443.11 and penalties pursuant to Wis. Stat. s. 443.18

__________________________
Signature of Affiant

__________________________
Name of Affiant

Subscribed and sworn to before me

day of ____________, 20__.

__________________________
Notary Public

___________ County, State of ____________

My commission: ___________________________

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Approved by: ___________________________
Member of the section or authorized designee

Date: ___________________________