

**SOUTH DAKOTA BOARD OF TECHNICAL PROFESSIONS**

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**CONFIDENTIAL COMITY REFERENCE FORM**

*Please print or type*

*(Form is to be mailed directly to the Board Office.)*

Reference Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

\_\_\_\_\_ has applied for professional licensure in the state of South Dakota. You have been named as being familiar with this applicant's professional work and/or personal characteristics. Your cooperation and early reply will be appreciated.

- 1. Are you a
  - Professional Engineer
  - Land Surveyor
  - Architect
  - Landscape Architect
  - Petroleum Release
  - Other

If yes, please list original state of licensure \_\_\_\_\_ and license # \_\_\_\_\_

2. How long have you known the applicant well? \_\_\_\_\_

3. What is/was your association with the applicant? \_\_\_\_\_

4. Are you familiar with applicant's professional work? \_\_\_\_\_

5. Please rate the applicant's qualifications:

Characteristics	High	Good	Average	Fair	Poor
Quality of professional work					
Initiative					
Dependability					
Cooperation with fellow workers					
Integrity					

6. Your frank appraisal of the applicant: **(Please do not omit.** Additional sheets may be used.)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_