

INSTRUCTIONS FOR APPLYING FOR CERTIFICATION AS A PROFESSIONAL TRAFFIC OPERATIONS ENGINEER™ (PTOE)

Carefully read all of the directions before completing the application.

Applications must be typed or legibly printed in ink. Required documents must be enclosed as part of the application.

1 Check the TPCB web site, www.tpcb.org, for up-to-date information, exam schedules, applications and frequently asked questions. Check this box and enter the examination of your choice.

2 Enter your name as you would like it to appear on your PTOE certificate. A middle name or initial is not required. Enter birth date in the format: "Jan. 1, 1999." A driver's license number or other photo identification number is required for entrance to the examination. Postal code may be omitted if not applicable.

3 A candidate must hold a valid license issued by a state, province, or other governmental body to engage in the practice of civil, mechanical, electrical, or general engineering if he or she resides in a jurisdiction that issues such licenses.

The license must be valid on the date of the examination (and a valid license must be maintained to keep the certification valid).

If you reside in a jurisdiction that does not issue governmental licenses to practice engineering, you should attach verifiable evidence of your professional education, membership in professional organizations and other verifiable information that will establish to the satisfaction of the Certification Board that you have gained a status in your jurisdiction equivalent to that of a registered professional engineer in the United States or Canada.

"Continuing Professional Development" refers to a verified requirement that the holder of a professional engineer license engage in a specified quantity of educational or professional improvement activities in order to maintain a valid license.

4 Two photocopies are required. One is of the original license certificate or another official document that shows the issuing jurisdiction, the class of license and the date of issue. The second photocopy should be of a receipt, or other official document that verifies that the license is valid on the selected examination date. If the original license does not expire, attach a note to that effect.

5 If the issuing institution is not identifiable by name alone, please include the location. A master's or doctor's degree may be substituted for one or two years of prelicensed experience, respectively, if awarded for study in the traffic operations area at an accredited institution. If you wish an academic degree to be substituted for experience, please attach a description of the education program or a transcript of courses underlying the degree.

6 The Certification Board has adopted the following definition: "*The professional traffic operations engineer is a person who applies a comprehensive knowledge of technology and scientific principles acquired through study and experience to supervision of the day-to-day operations of traffic systems, including the analysis of those operations, detection of problems and deficiencies, setting of priorities, assignment of resources and development of improvements in operations through geometric design, traffic control, or other means. The*

Professional Traffic Operations Engineer™ may carry out some but not all of the above duties, or serve as a consultant to individuals with the above responsibilities."

It is important to follow this definition in describing duties in the required attached resume and in determining the "years of traffic operations experience" for each assignment. Many important professional activities (teaching, pavement design, theoretical research, system planning, etc.) are outside this definition. Many assignments for engineering employees and/or consultants may involve both traffic operations and nontraffic operations components. You should analyze the professional activities involved in each of your reported assignments and estimate an equivalent time for that portion of the assignment devoted to traffic operations engineering. Supervision of traffic operations employees, including time spent on associated administrative functions, is considered to be the

practice of traffic operations and nontraffic operations responsibilities should be prorated on a supportable basis.

Enter the engagement from/to dates in the format 1/98-2/99 and the amount of applicable traffic operations experience in 1/10 year increments. Four years of traffic operations experience or advanced education is required for certification.

7 List the requested information. If the organization name is not adequate identification, please include a location.

8 The Certification Board will provide facilities fully meeting ADA requirements, similar to those provided to you at your professional school. A request for reasonable testing accommodation must be accompanied by a certification by your health-care provider of reasonable required accommodations.

9 The Certification Board will provide an alternate test date if the examination falls on a Sabbath that you observe. Your request for an alternate test date must be accompanied by a letter of confirmation from your clergy.

10 Fees are as follows:

Application and Examination Fee (nonrefundable).....\$150

Three year certification and renewal fee. (Will be refunded to

unsuccessful candidates).....\$275

Payment of \$425 must accompany application.

Please make check payable to TPCB. Certification fee will be refunded if you do not meet the PTOE requirements.

Note: *The U.S. Veteran's Administration (VA) has approved reimbursement of the PTOE examination fee for qualified individuals under the Montgomery GI bill—Active Duty (Chapter 32), Veterans Education Assistance Program (VEAP, Chapter 32), and Dependant's Educational Assistance (also called DEA or Chapter 35). The application is available at www.vba.va.gov/pubs/forms/22-1990.pdf.*

11 The statement of obligation is an important part of this application. You should read and understand that it limits certain rights to damages and requires you to certify that the information you supply is based on these instructions and is accurate and complete. It also affirms that you have not had professional license, membership, or employment suspended or terminated for unethical or illegal actions. Please contact staff if you have any questions.

12 You must sign, date and affix your engineering seal to this statement. (If an engineering seal is not required by your engineering license, so state.)

Note: *For exam preparation information, please visit www.tpcb.org/ptoe/examday.asp*

PROFESSIONAL TRAFFIC OPERATIONS ENGINEER™ (PTOE)

CERTIFICATION APPLICATION

Please return this completed form to:
Transportation Professional Certification Board Inc. (TPCB)
1627 I ("Eye") St., NW, Suite 600 • Washington, DC 20006 USA
Tel: 202-785-0060 • Fax: 202-785-0609 • E-mail: certification@ite.org

*Please type or print in black ink **all** the following information.*

1. Enter date and location of the examination you wish to take:

DATE (mo./year) CITY STATE/PROVINCE

This completed application **MUST** be received at least 30 days prior to the selected examination month.

A listing of examination dates and locations can be found at www.tpcb.org/examschedule.asp.

2. Enter the following personal information. (See instructions.)

FIRST NAME MIDDLE NAME OR INITIAL LAST NAME

JOB TITLE EMPLOYER

HOME BUSINESS PREFERRED MAILING ADDRESS STREET

CITY STATE/PROVINCE POSTAL CODE COUNTRY

DATE OF BIRTH DRIVER'S LICENSE NUMBER (TO BE USED FOR ENTRANCE TO EXAM) OR OTHER PHOTO IDENTIFICATION NUMBER TYPE OF ID

E-MAIL ADDRESS TELEPHONE NUMBER FAX

3. Provide the following information on current licenses to practice professional engineering issued to you which you expect to continue to be valid on the above examination date. (See instructions.)

ISSUING JURISDICTION LICENSE NUMBER CLASSIFICATION (C.E., P.E., etc.) DATE OF ISSUE

CURRENT EXPIRATION DATE Check here if license requires Continuing Professional Development.

4. **ATTACH A PHOTOCOPY** of the above license and of a document showing the current expiration date.

5. List all academic degrees you hold. (See instructions.) Attach additional sheet(s) if needed.

INSTITUTION FIELD OF STUDY DEGREE DATE ISSUED

	INSTITUTION	FIELD OF STUDY	DEGREE	DATE ISSUED
A				
B				
C				
D				

Please complete the back of this page.

