

**Mississippi Board of Licensure for  
Professional Engineers and Surveyors**  
660 North Street, Suite 400  
Jackson, MS 39202

**Social Security Number Affidavit**

**Licensee/Applicant Information**

**Name:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Suffix: \_\_\_\_\_

**Date of Birth** (mm/dd/yyyy): \_\_\_\_\_ **Daytime Telephone Number:** \_\_\_\_\_

**Physical Address:**

P O Box or Street, City: \_\_\_\_\_

State or Foreign Country, Zip or Postal Code: \_\_\_\_\_

**Mailing Address:**

(if different than physical address)

P O Box or Street, City: \_\_\_\_\_

State or Foreign Country, Zip or Postal Code: \_\_\_\_\_

Email address: \_\_\_\_\_

**Profession/**

**Occupation:** \_\_\_\_\_ **License/Certificate/Registration Number:** \_\_\_\_\_

(leave blank if this is a new application)

1. I am applying for a Professional Engineer or Professional Surveyor license OR Engineer Intern or Surveyor Intern enrollment in Mississippi.
2. I do not have a social security number and (check one of the following):
  - I am not physically present in the United States.
  - I am a non-immigrant in the United States on a student visa.
  - I am a non-immigrant P-1 individual athlete in the United States on an authorized stay pursuant to Title 8, Section 214.2(p) of the Code of Federal Regulations and Section 214(a)(2)(B) of the Federal Immigration and Nationality Act.
  - Other – Please explain on the reverse side of this form.
3. I am the person identified above and the information contained herein is true and correct to the best of my knowledge. I understand that under Mississippi law, providing false information is grounds for denial, suspension, or revocation of a license or enrollment.

**ATTESTATION**

I do hereby swear or affirm that the information contained in this affidavit is true and correct to the best of my knowledge. By affixing my signature hereto, I acknowledge that I understand that making a false statement herein constitutes perjury as defined in MS Code 97-9-59, an offense punishable by up to ten (10) years in the state penitentiary pursuant to MS Code 97-9-61.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date