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## FORM UROL - WAIVER OF EXAM PURSUANT TO UNIVERSAL RECOGNITION OF OCCUPATIONAL LICENSES ACT

**\*This form only applies to an individual who has established residency and is applying for licensure pursuant to the provisions of the Universal Recognition of Occupational Licenses Act codified in Miss. Code Ann. §73-50-2, et seq. \*Applicant must take and pass the MS Business and Law Exam.**

<b>THIS FORM MUST ACCOMPANY A COMPLETED APPLICATION.</b> PURSUANT TO THE PROVISIONS OF THE UNIVERSAL RECOGNITION OF OCCUPATIONAL LICENSES ACT, MISSISSIPPI SHALL RECOGNIZE OCCUPATIONAL LICENSES OBTAINED FROM OTHER STATES. MISS. CODE ANN. §73-50-2, ET. SEQ.	
<b>SECTION 1: IDENTIFYING INFORMATION OF INDIVIDUAL REQUESTING WAIVER OF EXAM</b>	
Name of individual requesting waiver of exam:	
Social Security Number:	Email to send MS Business and Law testing information:
<b>SECTION 2: PROOF OF RESIDENCY - Must attach at least one of the following</b>	
<input type="checkbox"/> State issued identification card <input type="checkbox"/> Current MS residential utility bill with applicant's name and address <input type="checkbox"/> Documentation of applicant's current ownership or current lease of a residence in MS <input type="checkbox"/> Documentation of current in-state employment or notarized letter of promise of employment of applicant or applicant's spouse <input type="checkbox"/> Other verifiable documentation demonstrating Mississippi residency	
<b>SECTION 3: PROOF OF PREVIOUS TRADE EXAM OR EXPERIENCE (Must Select One)</b>	
<input type="checkbox"/> Applicant holds a current and valid license in another state with a similar scope of practice and has held license for at least one (1) year  *Must attach reciprocity verification form completed by other state	<input type="checkbox"/> Applicant worked in a similar scope of practice for at least three (3) years in another state that does not regulate construction on the state level.  *Must attach references including name, address valid phone number and dates of project for at least 3 jobs previously completed.
<b>SECTION 4: ANSWER EACH OF THE FOLLOWING QUESTIONS.</b> IF A QUESTION DOES NOT APPLY, ENTER "N/A". IF A SPACE PROVIDED IS NOT SUFFICIENT, ATTACH SEPARATE SHEET(S). MISREPRESENTATIONS OF INFORMATION SHALL BE DEEMED SUFFICIENT CAUSE FOR DENIAL OF APPLICATION OR REVOCATION OF LICENSE AND/OR SUBJECT TO CRIMINAL PROSECUTION FOR MAKING FALSE OFFICIAL STATEMENTS IN ACCORDANCE WITH MISSISSIPPI LAW.	
Has applicant been connected to another license or registration issued by MSBOC or any other state? If so, provide the name of the state that issued the license or registration, the license or registration number, and current status of license or registration. (i.e., current, expired, revoked, inactive, etc.) ATTACH COPIES OF ANY AND ALL OTHER LICENSES OR REGISTRATIONS HELD.)	
Has applicant ever been the subject of disciplinary action by MSBOC or any other jurisdiction? (Discipline includes, but is not limited to, restrictions, conditions, probation, fine or reprimand.) If so, please explain.	
Has applicant committed any act that would constitute grounds for refusal, suspension, surrender, revocation or denial of renewal of a license or registration to perform construction? If so, please explain.	
Has applicant voluntarily surrendered a license or registration in connection with or to avoid disciplinary action because of negligence, intentional misconduct, or otherwise related to performing construction? If so, please explain.	
Does applicant have complaint(s), allegation(s) or investigation(s) pending in any jurisdiction that relates to unprofessional conduct, competence or an alleged crime? If so, please explain.	
Has applicant ever been arrested, charged, plead guilty or been convicted of any charges relating to bid rigging or home repair fraud? If so, please explain.	
Has applicant ever failed to complete a construction contract or any work awarded? If so, please explain.	

Print name of applicant

Signature of applicant

Date