



## APPLICATION FOR FUNDAMENTALS OF SOIL SCIENCE (FSS) EXAM INSTRUCTIONS

1. Read the qualifications for admission to the Fundamentals of Soil Science Examination ([MN Rule 1800.3910, Subp. 2](#) and [Subp. 5B](#)) on the Board’s website [mn.gov/aelslagid/rules.html](http://mn.gov/aelslagid/rules.html).
2. Complete the FSS Application Form (pages 1 and 2) and submit the application and examination fee of **\$220** (make check payable to the **MN Board of AELSLAGID**) to the address above. Do not send cash.

Part C of the application requires you to list your soil science courses and credit hours (see [MN Rule 1800.3910, Subp. 5B](#) and Part C for details).

3. Include all required transcript(s) with your application.

If you are currently enrolled in a Board-approved baccalaureate soil science program	Submit an unofficial transcript with your application. Your unofficial transcript <b>MUST</b> show your name, the name of the college/university and total credits. <b>Note:</b> Student audit reports, student progress reports, grade sheets and student course listings are NOT “unofficial transcripts.”  You must be within 30 semester credits or 45 quarter credits from graduation from a soil science curriculum approved by the Board in order to qualify to sit (see <a href="#">MN Rule 1800.3910, Subp. 2</a> ).
If you have graduated from a baccalaureate or higher degree program in soil science	Submit official transcript(s) of all credits from all college, universities and/or technical schools attended, including non-degree coursework. The transcript(s) may be mailed directly to the Board office by your college/university or you may send it along with your application in the original sealed envelope. Do not open the transcript as it will then no longer be considered “official.”

4. **Previous FSS exam applicants note:** You must submit a new application to the Minnesota Board and include the \$220 fee.
  - **An updated transcript is required if** you have not graduated since your previous application, but have taken addition coursework.
  - **A final, official transcript is required if** you have graduated since your previous application.
5. Should you need special testing accommodation, please see the information on [Instr-2](#) and include the [Request for Accommodation](#) form with your application.
6. **Sign and date the form at the bottom of [page 2](#).**

If your application is approved, you will be instructed by letter regarding next steps in the examination process. If your application is denied, the examination portion of your fee (\$195) will be refunded.

**April 12, 2019, FSS Exam Application Deadline: February 11, 2019**

**If you have questions regarding your application, please call the Board office at 651-296-2388.**

## NOTICE REGARDING SPECIAL ACCOMMODATIONS

To request special accommodation for the **Fundamentals of Soil Science Exam**, send the [Accommodation Request Form](#) with your application.

### A BRIEF SUMMARY OF YOUR RIGHTS UNDER THE AMERICANS WITH DISABILITIES ACT

#### INTRODUCTION

The Americans with Disabilities Act (“ADA”) covers “public entities.” The Board is a “public entity” covered by the ADA. The Board may not refuse to allow a person with a disability to take the examination simply because the person has a disability. It must permit persons with disabilities to take the examination in an integrated setting unless separate or different measures are necessary to ensure equal opportunity. It must eliminate unnecessary eligibility standards or rules that deny individuals with disabilities an equal opportunity to take the examination.

#### WHO IS COVERED?

The ADA provides comprehensive civil rights protection for “qualified individuals with disabilities.” An “individual with a disability” is a person who: 1) has a physical or mental impairment that substantially limits a “major life activity,” 2) has a record of such an impairment, or 3) is regarded as having such an impairment. “Major life activities” include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. Individuals who currently engage in the illegal use of drugs are not protected by the ADA when an action

is taken on the basis of their current illegal use of drugs.

A “qualified” individual with a disability is one who meets the essential eligibility requirements for the examination. The Board is not required to take any action that would result in a fundamental alteration in the nature of the examination or an undue financial and administrative burden. However, the Board must take any other action, if available, that would not result in a fundamental alteration or undue burdens but would ensure that individuals with disabilities receive the benefits or services.

#### WHAT IS REQUIRED?

The Board is required to make reasonable modifications in any policies, practices, and procedures that deny equal access to individuals with disabilities, unless a fundamental alteration in the examination would result. To do so, it must furnish auxiliary aids and services when necessary to ensure effective communication, unless an undue burden or fundamental alteration would result. The Board may not place special charges on individuals with disabilities to cover the costs of measures necessary to ensure nondiscriminatory treatment, such

as making modifications required to provide program accessibility or providing qualified interpreters. Finally, it must operate the examination so that, when viewed in its entirety, it is readily accessible to and usable by individuals with disabilities.

Integration of individuals with disabilities into the mainstream of society is fundamental to the purposes of the ADA. The Board may not provide the examination to individuals with disabilities through programs that are separate or different, unless the separate programs are necessary to ensure that the benefits and services are equally effective. Even when separate programs are permitted, an individual with a disability still has the right to choose to participate in the regular program. The Board cannot require an individual with a disability to accept a special accommodation or benefit if the individual chooses not to accept it.

#### QUESTIONS?

If you have any questions about the ADA we encourage you to call the United States Department of Justice, which has an ADA information line, at (202) 514-0301 (voice) or (202) 514-0381/0383 (TDD). These telephone numbers are not toll-free numbers.

#### NOTICE OF COLLECTION OF PRIVATE DATA

In accordance with the Minnesota Government Data Practices Act (MN Statute §13.04, Subd. 2), the Board is required to inform you of your rights as they pertain to private data collected from you on this application for licensure. The data you furnish on the application will be used by the Board to assess your qualifications for licensure. The collection of your social security number by the Board is required by both federal and state laws. You are not legally required to provide this data; however, if you fail to do so, the Board may be unable to approve your application or issue your license.

Federal law (42 U.S.C. 666(a)(13)) requires each state to collect social security numbers at the time of application for a professional or occupational license in order to improve effectiveness of child support enforcement.

Additionally, pursuant to Minnesota Statutes §270C.72, subdivision 4 (2016) the Board must provide the Commissioner of the Minnesota Department of Revenue a list of all applicants, including name, address and social security number or Individual Tax Identification Number (ITIN), each calendar year for the purpose of identifying individuals owing delinquent taxes. Pursuant to Minnesota Statutes §13.41, subdivision 2 (2016), all application data, except name and designated address, are private data until licensure is granted. When licensure is granted, all data, except social security number, become public record.

The Board will not share your private data with other persons or agencies unless you authorize its release or it is required by law.



## REQUEST FOR SPECIAL ACCOMMODATION (FSS EXAM)

Complete this form **only if you are requesting special accommodation for the FSS Exam** (see information on [page Instr-2](#) and below).

The ADA requires this agency to make “reasonable accommodation” for applicants with disabilities in giving this examination. If you are a person with a disability which may affect your ability to enter the examination facility or to take any portion of the examination, the ADA may require us to provide alternative examination arrangements. We are not required to do so if we are unaware of your need for accommodations. We ask that you inform us of any alternative arrangement you may require to take this examination. Please complete the following information:

Legal Name \_\_\_\_\_  
(First) (Middle) (Last) (Suffix)

Street Address \_\_\_\_\_ Phone # \_\_\_\_\_  
(No PO boxes)

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

**REQUIRED!**  I have attached supporting documentation from a qualified professional that describes the disability and the resulting functional limitations and explains the need for the requested accommodations.

Examples of reasonable accommodations include (but are not limited to) readers, oral interpreter or enlarged print.

**Describe in detail your accommodation request (use additional pages, if necessary):**

### THIS SECTION FOR BOARD USE ONLY

<input type="checkbox"/> <b>APPROVED</b> <input type="checkbox"/> <b>DENIED*</b>
Signature
Printed Name
Date

Location (if other than scheduled exam site):

Type of accommodation (reader, hearing impaired, etc.):

\*If denied, include copy of denial letter in applicant file.



FOR BOARD USE ONLY
Application # _____

## APPLICATION FOR FUNDAMENTALS OF SOIL SCIENCE (FSS) EXAM

**Application and Exam Fee: \$220**  
(Must accompany application.)

FOR BOARD USE ONLY
Date In-Training _____
Status Recorded _____

Application Deadline for April 12, 2019, FSS Exam: **February 11, 2019**

**Part A: Applicant Information** (All fields are required.)

- Are you or your spouse an active duty military member? Or have you left service in the last two years with an honorable or general discharge?  No  Yes (Priority processing)
- The address below is my (check one):  Home  Business. If **business**, list name: \_\_\_\_\_
- General/contact information:
 

Legal Name _____ <small>(First) (Middle) (Last) (Suffix)</small>	SS # _____ <small>(Or Individual Taxpayer ID #, if no Social Security #)</small>
Former Name _____ <small>(If applicable)</small>	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address _____ <small>(No PO boxes)</small>	Birth Date _____ <small>(MM) (DD) (YYYY)</small>
City _____ State/Province _____	Phone # _____
Zip/Postal Code _____ Country _____	
- Have you previously applied to the Minnesota Board to sit the FSS exam?  No  Yes  
If **yes**, under what name? \_\_\_\_\_

**Part B: Education**

- List all undergraduate and graduate institutions. **You must submit a transcript** from each ([see Instructions](#)).  
If you have not yet graduated, simply list the **anticipated** degree and date of graduation.

College/University Attended	City, State, Country	Actual/Anticipated Graduation Date (mm/yyyy)	Degree Received/Anticipated

