TEXAS DEPARTMENT OF LICENSING AND REGULATION

PO Box 12157 · Austin, Texas 78711 · (800) 803-9202 · (512) 463-6599 · FAX (512) 475-2871 www.license.state.tx.us · CS.electricians@license.state.tx.us

JOURNEYMAN ELECTRICIAN LICENSE APPLICATION INSTRUCTIONS

This completed application is required prior to scheduling your Texas examination. If your application is approved, we will contact the exam provider (PSI) and they will send you a postcard to proceed with scheduling your Texas examination. The exam fee will be paid directly to PSI.

If you've passed the ICC exam prior to 09/01/09 and within two years of filing this application, include a copy of the passing grade notice with your application.

GENERAL INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all items have been submitted as required. All information provided must be typed or printed in <u>black ink</u> using upper case letters. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Please use a paperclip to fasten all pages together, with the check or money order on top. **Do not use staples**.

If one check will be used to pay for multiple applications, a **Combined Check Worksheet** must be completed and submitted with the applications and payment. The Combined Check Worksheet is available on the Department's website.

PAGE 1 – GENERAL INFORMATION

<u>NAME</u> – Please write your name in the spaces provided. (Last, First, Middle Initial)

<u>SUFFIX</u> – Examples of a suffix include Jr., Sr., and II. (MR is not a suffix.)

<u>DATE OF BIRTH</u> – Write the two digit numeric equivalent (ex: 03 for March) for the month of your birth, followed by the two digit day and the four digit year. (MM/DD/YYYY)

GENDER – Write "M" for Male or "F" for Female.

<u>SOCIAL SECURITY NUMBER</u> – The Social Security number disclosure is required by Section 231.302(1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:

www.oag.state.tx.us/child/index or call (512)460-6000 or (800)252-8014.

<u>MAILING ADDRESS</u> – This is the address to which the Department will mail your correspondence. Indicate the number and street, or post office box of your mailing address. Use of the zip plus-4 is not required, but it helps the postal service direct mail more efficiently and accurately.

PHYSICAL ADDRESS – This is the physical location of your residence. Do not use a post office box for this address.

<u>TELEPHONE NUMBER</u> – Write the telephone number, including area code, where we can reach you during the day. This may be your office phone number where we can leave a message.

<u>E-MAIL</u> – Please provide your e-mail address. The Department will add your address to the electricians' e-mailing list, which provides information from the Department on matters affecting electricians. Your e-mail address is confidential pursuant to the Texas Public Information Act, and the Department will not share it with the public.

FAX NUMBER - Write the fax number, including area code where you can receive faxes.

<u>CONVICTION OF CRIMINAL OFFENSE</u> – Indicate if you have ever been convicted of a criminal offense. If yes, complete and attach the Criminal History Questionnaire for each conviction. This form can be obtained from the TDLR website.

<u>LICENSE SANCTIONS</u> – Indicate if you have ever had an occupational license, certification, or registration suspended, revoked, or denied in any state, county or municipality. If you have, complete and attach the Disciplinary Action Questionnaire for each sanction. This form can be obtained from the TDLR website.

LICENSE REQUIREMENTS

You must have at least 8,000 hours of on-the-job training under the supervision of a Master Electrician prior to taking the Texas exam. When your experience has been approved, PSI will contact you on how to schedule your Texas exam.

The employment history portion of the application must include the full 8,000 hours.

An Experience Verification Form is required for each employer and must be signed by the supervising Master Electrician.

If you are applying for a Journeyman reciprocal license, please see the "Journeyman Electrician License Application by Reciprocity Form". THIS APPLICATION is not required for reciprocity.

STATEMENT OF APPLICANT

Before you sign, carefully read the statement at the bottom of the application. Be aware that information provided on this application and any attachments is subject to audit. Providing false information may result in revocation of this license and the imposition of administrative penalties.

EMPLOYMENT HISTORY

 If you are applying for licensure by experience and exam, you will need to complete all portions of the employment history indicating your 8,000 hours under the supervision of a Master Electrician. All areas of this document must be completed.

An Experience Verification Form or letters on company letterhead must be completed and signed by the Supervising Master Electrician. This form along with the Employment History portion of the application must coincide.

If you are licensed as a Journeyman electrician by a municipal or regional licensing authority, you
do not need to provide any experience with this application. Include a copy of your Journeyman
electrician license issued by the municipal or regional licensing authority. You must also include
the "Discontinued Municipal or Regional Licensing Program Form".

FEE

The fee for this license is **\$35**. Please send one check or money order for the total amount due, payable to TDLR. Fees and documents should be mailed to:

TDLR PO BOX 12157 AUSTIN, TEXAS 78711

PLEASE COMPLETE THE APPLICATION IN BLACK INK.
ANY DEVIATION FROM THESE REQUIREMENTS MAY DELAY THE PROCESSING OF YOUR APPLICATION.

DOCUMENTS SUBMITTED WITH THE APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF THE COMPLETED APPLICATION, ALL ATTACHMENTS AND YOUR CHECK.



TEXAS DEPARTMENT OF LICENSING AND REGULATION

P.O. Box 12157 - Austin, Texas 78711-2157 1-800-803-9202 - (512) 463-6599 - FAX (512) 475-2871 www.license.state.tx.us - CS.Electricians@license.state.tx.us

APPLICATION FOR:

JOURNEYMAN ELECTRICIAN LICENSE APPLICATION

PURSUANT TO TITLE 8, OCCUPATIONS CODE, CHAPTER 1305

C	DO NOT WRITE IN THE FEE AREA IMMEDIATELY BELOW									
	FEE	RECEIPT NUMBER	FEE AMOUNT	PMT. AMOUNT	MONEY TYPE					
	License Fee		\$35.00							
		DO NOT WRITE	ABOVE THIS LIN	E						
ap yo	oplication is approved, we bur Texas exam.	eted application to TDLR be will contact the exam provid REQUIREMENTS FOR YOUR LI	fore scheduling ye er (PSI) and they	our Texas examina will send you a po	stcard to sched					
1.	Full Name:									
_	Last		First	Middle Ini	tial Suffix (JR,	SR, III)				
2.	Date of Birth:		3.	☐ Female	□Male					
4.	Social Security No.: See Note 1 on instructions				_					
5.	Number, Street, Suite No., Apt. No. City State Physical Location :									
	Number, Street, Suite No., or Apt.	No.								
	City State Fax Number and Email Ac	Zip Code	() Area Code Pho	ne Number						
	FAX Number: () Area Code Phone Number		E-mail Address (Ex: johndoe@aol.com) See Note 2 on instructions							
6.	If YES, attach a "Criminal	victed of a criminal offense? History Questionnaire" to this sdemeanors other than minor		□Yes	□ No					
	Have you ever had an oc state? (This does NOT i If YES, attach a "Disciplina		n suspended, revo ☐ Yes	oked or denied i □ No	n any					
		THIS FORM CONS	SISTS OF A PAGE	2						

To qualify for a Journeyman Electrician License, you must meet either A, or B below:

Α.

- Pass the Texas Journeyman Electrician Exam,
- completed at least 8,000 hours of on-the-job training under the supervision of a master electrician.

Completed application will also include the Experience Verification Form (or letters from previous supervisors) and the Employment History portion of the application.

The above requirements (excluding the exam) <u>must be **complete** prior to taking your examination</u>.

<u>OR</u>

В.

Held a Journeyman Electrical License issued by a Texas municipality or region that has elected to
discontinue issuing or renewing licenses. (Held the municipal or regional license for the preceding year; and
submit this application under this chapter within 90 days of the date the municipality or region stops issuing or
renewing licenses.)

The Discontinued Municipal or Regional Licensing Program Form must be completed and attached to this application.

STATEMENT OF APPLICANT

I certify that I have read and will comply with all applicable provisions of the Electrician Act; Texas Occupation Code, Chapter 1305 and Chapter 51; Tex. Admin. Code, Chapter 60; and the Electricians Administrative Rules, Tex. Admin. Code, Chapter 73.

I understand that providing false information on this application may result in denial of this application and/or revocation of the license I am requesting and the imposition of administrative penalties.

Date Signed	Signature of Applicant

attach them if needed. For each employment period, you must provide either a letter from the Master Electrician who supervised younder-job training, or a completed Experience Verification Form. Note: To avoid delay in processing your application, the following sections AND the attached documentation must be completed. Employer: Employer's Telephone No. () Address: City, State, Zip Master's License/Cert. #: Issuing Jurisdiction: Starting Date: Leaving Date: Total Years or Hours of Experience: Describe job duties performed: Employer's Telephone No. () Address: Employer's Telephone No. () Address: City, State, Zip	Indicate below your employment history for each employer. You can make additional copies of this form and attach them if needed. For each employment period, you must provide either a letter from the Master Electrician who supervised your on-the-job training, or a completed Experience Verification Form. Note: To avoid delay in processing your application, the following sections AND the attached documentation must be completed. Employer: Employer: Employer: Address: City, State, Zip Master's License/Cert. #: Describe job duties performed: Employer: Employer: Total Years or Hours of Experience: Employer: Employer: Employer: City, State, Zip Master's License/Cert. #: Master's License/Cert. #: Master's Name: Starting Date: Leaving Date: Total Years or Hours of Experience:	Applicant's Name:	Social Security #
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ELECTRICIAN EXPERIENCE VERIFICATION FORM

THIS FORM MUST BE COMPLETED BY A PERSON QUALIFIED TO VERIFY ELECTRICIAN EXPERIENCE.

Name of Applicant						
Master Electrician's Name	S		F	hone N	lumber	
Company Name						
List the license ty have previously h	pe that you currently hold eld:	or			county, or m s license:	unicipality
	(Copy or verification	ation of lice	nse is red	 quired.)	
License Number:		Effective Date:			Expiratior Date:	1
	the electrical work of the you are verifying?	applicant	Yes		No 🗆	
Did the applicant period you are ve	hold a valid license during rifying ?	g the	Yes		o 🗆	
If yes, what type of	of license?					
Amount of on the	job training completed by	applicant:	Years		Months	
DESCRIBE THE	ELECTRICAL WORK PE	RFORMED	:			
	BY SIGNING THIS FORM TION ON THIS FO	•				
	Master's Signatu	re	_	D	ate	