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

SIGN APPRENTICE ELECTRICIAN LICENSE APPLICATION INSTRUCTIONS

AN APPLICATION IS NOT CONSIDERED COMPLETE AND WILL NOT BE PROCESSED UNTIL ALL ITEMS HAVE BEEN SUBMITTED AS REQUIRED.

GENERAL INSTRUCTIONS

The application must be completed and signed by the applicant. All information provided must be typed or printed in <u>black ink</u>. 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.

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.

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

SUFFIX – 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.

<u>PHYSICAL ADDRESS</u> – 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-mail 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.

<u>CONVICTION OF CRIMINAL OFFENSE</u> – Indicate if you have ever been convicted of a criminal offense. If yes, complete and attach a 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, probated, 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. Note, for the purposes of license sanctions, a driver's license is NOT an occupational license.

Carefully read the statement at the bottom of the application before you sign and date 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.

ATTACHMENTS

<u>CRIMINAL HISTORY QUESTIONNAIRE</u>
If you have ever been convicted of a criminal offense, attach a completed Criminal History Questionnaire and any attachments requested on the questionnaire for each conviction.

<u>DISCIPLINARY ACTION QUESTIONNAIRE</u>
If you have ever had an occupational license (not a drivers license) suspended, revoked, probated, or denied in any state, county or municipality, attach a completed Disciplinary Action Questionnaire and any attachments requested on the questionnaire for each sanction.

FEES
The fee for this license is \$20. 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

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



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APPLICATION FOR:

SIGN APPRENTICE ELECTRICIAN LICENSE APPLICATION

PURSUANT TO TITLE 8, OCCUPATIONS CODE, CHAPTER 1305

Do Not Write in the Fee Area Immediately Below							
	FEE	RECEIPT NUMBER	FEE AMOUI		PMT. AMOUNT	MONEY TYPE	
	License Fee		\$20.0	0			
DO NOT WRITE ABOVE THIS LINE							
IF ALL REQUIREMENTS FOR A LICENSE ARE NOT MET WITHIN TWELVE (12) MONTHS OF THE FILING DATE, THE APPLICATION WILL BE CLOSED.							
1.	Full Name:						
_	Last		First		Middle	Initial Suffix (JI	R, SR, III)
2.	Date of Birth:		3. (Sender	☐ Female	☐ Male	
4.	Social Security No.: See Note 1 on instructions				·		
5.	Mailing Address: (USED F (P.O. Box is allowed for this addre						
	Number, Street, Suite No., Apt. No.	o. or P.O. Box		`			
	City State Physical Location: (P.O. Box	Zip Code is not allowed for this address.		ode Phoi	ne Number		
	Number, Street, Suite No., Apt. No.	D.					
	City State	Zip Code	(Area Co) ode Phoi	ne Number		
	Fax Number and Email Addr	ess:					
	FAX Number: () Area Code Pho	ne Number	E-mail A	ddress (E	x: johndoe@aol.cor	m) See Note 2 on insti	ructions
6.	Have you ever been convicted of a criminal offense? ☐ Yes ☐ No If YES, attach a "Criminal History Questionnaire" to this application. Include all felonies and misdemeanors other than minor traffic violations.						
Have you ever had an occupational license, certification or registration suspended, revoked, probated or denied in any state? (This does NOT include a driver's license.) If YES, attach a "Disciplinary Action Questionnaire" with this application.							
STATEMENT OF APPLICANT							
Ad I u	ertify that I have read and will complete. Imin. Code, Chapter 60; and the Ele Inderstand that providing false inform Inderstand the providing false inform Inderstand the imposition of administrative providing the imposition of administrative provides.	ectricians Administrative Rules, rmation on this application may	Tex. Admin. Code, C	Chapter 73	3.		
Date Signed			Signature of Applicant				