

## **JOURNEYMAN SIGN ELECTRICIAN LICENSE APPLICATION INSTRUCTIONS**

### **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. NOTE: If you are filing this application under the grandfather provisions (Options C, D or E), all requirements MUST be met no later than December 31, 2005. All information provided must be typed or printed in black ink using upper case letters. The application and all 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 for the exact amount on top. **Do not use staples and do not** submit any pages on which you have not entered any data.

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**

NAME – 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)

OTHER NAMES – Examples here include birth name, maiden name, or an alias.

SOCIAL SECURITY NUMBER – 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

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

DATE OF BIRTH – 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)

TELEPHONE NUMBER – 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.

E-MAIL – 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.

MAILING ADDRESS – 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 address is the actual location of your place of business. If this address is the same as your mailing address, you may write SAME and skip the city, state, and zip code fields. A post office box will not be accepted as a physical address.

JOURNEYMAN SIGN LICENSE INFORMATION – If you have ever held a Journeyman Sign Electrician license issued by a regional or municipal licensing authority, indicate the city (or region) and state in which the license was issued, followed by the license number. Also provide the original issue and expiration dates and submit a clear and legible copy of your license with this application. If you do not know the date of original licensure, use 12/31 of the year in which your license was issued. If you have never held a Journeyman Sign Electrician license, leave this section blank.

EXAMINATION INFORMATION – If you have passed a Journeyman Sign Electrician's examination WITHIN THE LAST TWO YEARS, please indicate which exam you took. Check the ICC box if appropriate, or check "Other" and provide the name of that examination. If you were given a number with your examination, provide the number, the date you passed the examination and a copy of the exam pass notice. Please be aware that only those exams passed **within the two years** prior to filing this application will satisfy the examination requirement. If you have not passed an examination within the last two years, leave this section blank.

CONVICTION OF CRIMINAL OFFENSE – 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.

LICENSE SANCTIONS – Indicate if you have ever had an occupational license 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.

## **PAGE 2 – LICENSE CRITERIA & SIGNATURE**

On this page of the application, indicate which license criteria BEST describes your situation. **IT IS IMPORTANT THAT YOU CHOOSE ONE AND ONLY ONE OPTION.** Selecting more than one option or not selecting an option may delay processing of your application.

If you are seeking to be licensed through the grandfather provisions by choosing Option C, D, or E below, **THESE REQUIREMENTS MUST BE MET NO LATER THAN DECEMBER 31, 2005:**

Option C - Work in an area in which a municipal or regional licensing program exists, completed at least 12,000 hours on-the-job training under the supervision of a Master or Master Sign Electrician;

**OR**

Option D - Held a municipal or regional journeyman sign electrician license for at least one year;

**OR**

Option E - Graduated from an electrical apprenticeship program consisting of at least 576 hours of job-related education and 8,000 hours of on-the-job training.

Option F – Currently, Texas does not have a reciprocal agreement for a Journeyman Sign Electrician license. Refer to the Department website for the most up-to-date information.

**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 denial and or revocation of this license and the imposition of administrative penalties.**

### **PAGE 3 – EXPERIENCE HISTORY**

If you are applying for licensure by examination, complete this section to demonstrate that you have 8,000 hours of on-the-job training under the supervision of a Master or Master Sign Electrician.

If you are licensed as a Journeyman Sign 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 Sign Electrician license issued by the municipal or regional licensing authority. The Department will need to verify your licensure with the city listed on page 1 of the application. Be certain you have listed the name of the municipal or regional licensing authority and given your license number issued to you by that authority. NOTE: One year of experience/on the job training equals 2,000 hours.

If you are not licensed as a Journeyman Sign Electrician by a municipal or regional licensing authority, but have graduated from an electrical apprenticeship program (consisting of at least 576 hours of job- related education and 8,000 hours of on-the-job training) you do not need to provide any experience with this application. Include a copy of your graduation certificate and contact information for the program. The apprenticeship program must have been approved by the United States Department of Labor.

If you do not fall into either of the categories above, complete this section to demonstrate that you have 12,000 hours of on-the-job experience. If your on-the-job experience was not acquired under the supervision of a Master or Master Sign Electrician, explain the credentials of the person under whom it was earned. This page can be duplicated as necessary to provide enough information to document your experience. You need only provide the number of hours required for the license, NOT a complete history of all your experience.

## **EXPERIENCE VERIFICATION FORM**

### **ATTACHMENTS**

NOTE: The experience verification form is not required as part of the application; however, it is preferred and will allow us to process your license request in a more timely manner.

If the Department cannot verify enough experience through a city where you have held a license, (see the explanation under Experience History above) the Department will verify that you have the required experience based on information provided on the Experience Verification Form, which can be obtained from the Department's website. This form **MUST** be completed by a person qualified to verify that your electrician on-the-job training or license history was gained under the supervision of a licensed Master or Master Sign Electrician. If the experience was acquired under multiple electricians, a separate form must be submitted for each. This form may be duplicated as necessary. Note that 2,000 hours of on-the-job training equals one year of employment.

If an Experience Verification Form cannot be provided, any of the following may be submitted to verify experience through Alternative Documentation, which would include:

1. Letters from Master or Master Sign Electricians who supervised your on-the-job training.
2. Letters on company letterhead from former employers or business managers who will attest that you worked for a Master or Master Sign Electrician while in their employ.
3. Copies of service orders, contracts, or invoices. These must show type of work performed, dates and locations where the work was performed, and name of the customer.
4. Letters from current/past customers. These must show type of work performed, dates and locations where the work was performed, and name of the customer, or
5. Any other type of documentation that will show the same type of information.
6. On-the-Job Electrical Experience Documentation by Business Owner or Manager, On-the-Job Electrical Experience Documentation by the Applicant, and Proof of Business Existence. These documents are required to obtain your license with Alternative Documentation.

### **PROOF OF EXAMINATION**

If you have passed an ICC Journeyman Sign Electrician's examination **WITHIN THE LAST TWO YEARS**, attach a copy of the letter that notified you of your passing score.

### **RECIPROCAL LICENSE**

Currently, Texas does not have a reciprocal agreement for a Journeyman Sign license. Refer to the Department website for the most up-to-date information.

### **CRIMINAL HISTORY QUESTIONNAIRE**

If you have ever been convicted of a criminal offense, attach a completed Criminal History Questionnaire for each conviction.

### **DISCIPLINARY ACTION QUESTIONNAIRE**

If you have ever had an occupational license suspended, revoked, probated, or denied in any state, county or municipality, attach a completed Disciplinary Action Questionnaire for each sanction.

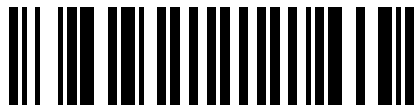
**FEES (All fees are NON-REFUNDABLE.)**

The fee for this license is **\$40**. 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 13489  
AUSTIN, TEXAS 78711

- PLEASE COMPLETE THE APPLICATION IN BLACK INK.
- ALL ATTACHMENTS MUST BE SUBMITTED ON SEPARATE PIECES OF SINGLE-SIDED, 8½" x 11" PAPER.
- PLEASE USE A PAPERCLIP TO FASTEN ALL PAGES TOGETHER. **PLEASE DO NOT USE STAPLES.**
- 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. DO NOT SUBMIT FORMS THAT YOU DID NOT HAVE TO COMPLETE.**



### JOURNEYMAN SIGN ELECTRICIAN LICENSE APPLICATION

JS

DO NOT WRITE IN THE FEE AREA IMMEDIATELY BELOW – ALL FEES ARE NON-REFUNDABLE				
FEE	RECEIPT NUMBER	FEE AMOUNT	PAYMENT AMOUNT	MONEY TYPE
License Fee		\$ 40.00	\$	

**DO NOT WRITE ABOVE THIS LINE**

**ALL INFORMATION MUST BE TYPED OR PRINTED IN BLACK INK AND IN ALL CAPITAL LETTERS.**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE INIT: \_\_\_\_\_

SUFFIX: \_\_\_\_\_ LIST ANY OTHER NAMES IF DIFFERENT: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ GENDER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

TEL NUMBER: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \* \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**IF YOU HAVE EVER HELD A JOURNEYMAN SIGN ELECTRICIAN'S LICENSE PLEASE COMPLETE THE FOLLOWING:**

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ LICENSE: \_\_\_\_\_

ORIGINAL ISSUE DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

HAVE YOU PASSED A JOURNEYMAN SIGN ELECTRICIAN'S EXAMINATION? (PLEASE DARKEN CIRCLES COMPLETELY)  YES  NO

IF YES:  ICC  OTHER \_\_\_\_\_ DATE PASSED: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ICC/SBCCI CERTIFICATION NUMBER: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? (PLEASE DARKEN CIRCLES COMPLETELY)\*  YES  NO

HAVE YOU HAD A LICENSE SUSPENDED, REVOKED OR DENIED IN ANY STATE? (PLEASE DARKEN CIRCLES COMPLETELY)\*  YES  NO



AN APPLICANT FOR A LICENSE AS A JOURNEYMAN SIGN ELECTRICIAN MUST HAVE AT LEAST 8,000 HOURS OF ON-THE-JOB TRAINING UNDER THE SUPERVISION OF A MASTER OR MASTER SIGN ELECTRICIAN; AND PASSED THE JOURNEYMAN SIGN ELECTRICIAN EXAMINATION. FOR APPLICATIONS FILED ON OR BEFORE DECEMBER 31, 2005, THE EXAMINATION MAY BE WAIVED BY COMPLETING ADDITIONAL REQUIREMENTS AS DESCRIBED IN OPTIONS C, D, OR E BELOW:

AS AN APPLICANT FOR A LICENSE AS A JOURNEYMAN SIGN ELECTRICIAN, I CERTIFY THAT I HAVE SATISFIED ONE OF THE FOLLOWING REQUIREMENTS (CHOOSE ONLY ONE): FILL IN CIRCLES COMPLETELY: ●

- A. PASSED THE JOURNEYMAN SIGN ELECTRICIAN EXAMINATION WITHIN THE LAST TWO YEARS AND HAVE COMPLETED AT LEAST 8,000 HOURS OF ON-THE-JOB TRAINING UNDER THE SUPERVISION OF A MASTER OR MASTER SIGN ELECTRICIAN.
- B. NEED TO PASS THE JOURNEYMAN SIGN ELECTRICIAN EXAMINATION AND CERTIFY THAT I HAVE COMPLETED AT LEAST 8,000 HOURS OF ON-THE-JOB TRAINING UNDER THE SUPERVISION OF A MASTER OR MASTER SIGN ELECTRICIAN.
- C. COMPLETED AT LEAST 12,000 HOURS OF ON-THE-JOB TRAINING UNDER THE SUPERVISION OF A MASTER OR MASTER SIGN ELECTRICIAN. **[ALL REQUIREMENTS MUST BE MET BY DECEMBER 31, 2005 FOR THIS OPTION.]**
- D. HELD A MUNICIPAL OR REGIONAL JOURNEYMAN SIGN ELECTRICIAN LICENSE FOR AT LEAST ONE YEAR. **[ALL REQUIREMENTS MUST BE MET BY DECEMBER 31, 2005 FOR THIS OPTION.]**
- E. GRADUATED FROM AN ELECTRICAL APPRENTICESHIP PROGRAM CONSISTING OF AT LEAST 576 HOURS OF JOB-RELATED EDUCATION AND 8,000 HOURS OF ON-THE-JOB TRAINING. **[ALL REQUIREMENTS MUST BE MET BY DECEMBER 31, 2005 FOR THIS OPTION.]**
- F. HOLD A JOURNEYMAN SIGN ELECTRICIAN LICENSE IN A STATE WITH WHICH TEXAS HAS A RECIPROCITY AGREEMENT.

WHICH STATE?

**[CURRENTLY, TEXAS DOES NOT HAVE A RECIPROCITY AGREEMENT FOR THE JOURNEYMAN SIGN ELECTRICIAN LICENSE.]**

I CERTIFY THAT I HAVE READ AND WILL COMPLY WITH ALL APPLICABLE PROVISIONS OF THE ELECTRICIAN ACT; TEXAS OCCUPATION CODE, 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 REVOCATION AND/OR DENIAL OF THE LICENSE I AM REQUESTING AND THE IMPOSITION OF ADMINISTRATIVE PENALTIES.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





Employer:	Employer's Telephone Number: (      )
Mailing Address:	
City and State/Zip:	Master's Name:
Master's License/Certificate Number:	Issuing Jurisdiction:
Starting Date:                      Leaving Date:	Total Years or Hours Experience:
<b>Describe job duties performed:</b>	

Employer:	Employer's Telephone Number: (      )
Mailing Address:	
City and State/Zip:	Master's Name:
Master's License/Certificate Number:	Issuing Jurisdiction:
Starting Date:                      Leaving Date:	Total Years or Hours Experience:
<b>Describe job duties performed:</b>	

Employer:	Employer's Telephone Number: (      )
Mailing Address:	
City and State/Zip:	Master's Name:
Master's License/Certificate Number:	Issuing Jurisdiction:
Starting Date:                      Leaving Date:	Total Years or Hours Experience:
<b>Describe job duties performed:</b>	

Employer:	Employer's Telephone Number: (      )
Mailing Address:	
City and State/Zip:	Master's Name:
Master's License/Certificate Number:	Issuing Jurisdiction:
Starting Date:                      Leaving Date:	Total Years or Hours Experience:
<b>Describe job duties performed:</b>	