



State of California
Department of Industrial Relations
Division of Apprenticeship Standards
www.dir.ca.gov/DAS/ElectricalTrade.htm
Electrician Certification Program

ET
Electrician
Trainee

APPLICATION FOR NEW REGISTRATION OF
= ELECTRICIAN TRAINEE =

Name: Last: _____ Sfx: _____ First: _____ Initial: _____

Other names as Electrician within previous 5 years: _____

Drivers License or State ID #: _____ D/L State: _____ Birthdate: ____/____/____

Please PRINT or type all information in INK

MM DD YYYY

Mailing Address: _____

City: _____ County: _____

State: _____ Zip: _____ - _____

Day Phone: _____ / _____ - _____ Evening Phone: _____ / _____ - _____

[Optional]

Current Electrical Employer (if any) to complete this box:

I attest under penalty of perjury that this Electrician Trainee shall be under the direct supervision of an electrician certified pursuant to Section 3099 who is responsible for supervising no more than one Electrician Trainee.

Employer Name (signature): _____

Employer Name (printed): _____

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip: _____ - _____

C.S.L.B. C10 License No.: | _____ | Phone No.: _____ / _____ - _____

Electrician Trainee to enter school number and name:

I certify that I am enrolled in the Approved Curriculum of classwork at: **Approved School No.:** | _____ |

Approved School Name (printed): _____

Attach copies of the Enrollment forms in an Approved Curriculum

Attach exact payment of \$25.00 by check or money order payable to 'DIR – Electrician Certification Fund'.

This registration must be renewed annually until you become certified or leave the trade.

Signature: _____ Date: _____

I certify under penalty of perjury that all statements and attachments are true and correct.

Keep a copy of this signed application and all attachments for your records.

Incomplete or inaccurately paid applications will NOT be approved.

Mail this completed form with all required attachments to:

Division of Apprenticeship Standards Attn: Electrician Certification Unit
PO Box 420603 San Francisco, CA 94142-0603