

# Electrician Trainee Enrollment Verification Request Form

Fill out this form and return to Stuart Hively or Tedde Titus (Room QQ207) or your instructor in exchange for your Verification of Enrollment Letter

Driver's License # \_\_\_\_\_ DL State \_\_\_\_\_  
(or)  
State ID# \_\_\_\_\_ ID State \_\_\_\_\_ Birthdate: \_\_\_\_\_  
MM/DD/YYYY

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
(Print Clearly) First MI Last

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_ City: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

I understand that in order to maintain my status as an Electrical Trainee, I must remain enrolled in my classes and continue attendance in my classes. If I miss two classes in a row or 20% of the class sessions, I will be dropped. I also understand that LBCC will notify the Division of Labor Standards Enforcement that I have dropped my classes and that I am no longer eligible to remain employed as an Electrical Trainee. *AB1087 SEC 4 Section 3099.4*

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

I would like to pick up my printed verification letter from:

\_\_\_\_\_  
(Instructor's name)

Elect: \_\_\_\_\_  
(Class)

Select only one of the following:

New Registration Form

Renewal of Registration Form. Must provide current ET#.

ET#: T \_\_\_\_\_

Reinstatement Form. Must provide current ET#.

ET#: T \_\_\_\_\_