



## ELECTRICIAN APPLICATION INSTRUCTIONS — PLEASE READ CAREFULLY

**Applications that are incomplete or missing required documents will not be processed and will be returned to the applicant.**

1. Submit a legible copy of government-issued identification (e.g., Driver's license or Passport) must be attached to the application.
2. A completed application, signed and **notarized** (see last two (2) pages of this packet).
3. A non-refundable application processing fee of **\$75.00**, in the form of a check or money order made payable to the R.I. Department of Labor & Training, is required. (Credit card payments are accepted in person only.)
4. A separate, **notarized** statement, on **company letterhead**, signed by your present or past employer, that should include a detailed list describing all work-related experience.
5. All Rhode Island Electrical Contractor tests require verification of experience in their respective trade for at least six (6) years and the possession of a Rhode Island Journeyman's license. The Electrical Journeyman's License must be valid for at least two (2) years prior to applying for a contractor's examination.
6. All Electrical Journeyman's Tests require verification of at least four (4) years of experience in their respective trade and 576 hours of related instruction approved by the Department of Labor and Training.
7. A valid copy of your out-of-state Electrician Trade License and an official license verification from your respective state. Note that computer printouts of verification trade licenses will not be accepted as proof.
8. **For all Rhode Island Indentured Apprenticeship Journeyman Testing Only:**  
Certificate of Completion of Apprenticeship issued by the RI Department of Labor & Training Apprenticeship Office is required for all Indentured Apprentices applying for Electrician journeyman exams. The Apprentice Completion form can be obtained at: [dlt.ri.gov/forms](http://dlt.ri.gov/forms).
9. All Electrician apprentices must submit a **notarized** letter on **company letterhead** with date of hire and job descriptions.
10. All Electrician apprentices must complete the ratio sheet by Master Electrician and must be signed.

**Recommended Study Material:** [dlt.ri.gov/study-material](http://dlt.ri.gov/study-material)

**View your application status online:** [dltweb.dlt.ri.gov/profregsonline/ApplicationStatus](http://dltweb.dlt.ri.gov/profregsonline/ApplicationStatus)

**Ratio sheet:** [dlt.ri.gov/sites/g/files/xkgbur571/files/2024-08/Company\\_Ratio.pdf](http://dlt.ri.gov/sites/g/files/xkgbur571/files/2024-08/Company_Ratio.pdf)



# RI Department of Labor and Training *Workforce Regulation and Safety*

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## **THIS IS AN IMPORTANT NOTICE**

If you do not understand the enclosed notice, please contact this office in the RI Department of Labor and Training, Division of Workforce Regulation and Safety to speak with a Spanish interpreter. Spanish interpreters are available to assist you. If you are attending a hearing, you cannot use your own interpreter. The Division of Workforce Regulation and Safety will provide an interpreter for you. It is important that you call the Division of Workforce Regulation and Safety at (401) 462-8570 or (401) 462-8580, at least seven (7) days prior to your hearing to request an interpreter.

The Division of Workforce Regulation and Safety is responsible to provide interpreter services at no cost to you. You are responsible for requesting these services in accordance with the procedures outlined in this notice.

### **PLEASE NOTE:**

Interpreters are available to assist customers in languages other than Spanish. Please contact the Division of Workforce Regulation at (401) 462-8580 or (401) 462-8570 to request an interpreter or written translation in a language other than Spanish.



### Non-Refundable Processing Application Fee

	Computer Code	Application Fee	2 Year License Fee*
<b><u>ELECTRICIANS:</u></b>			
Electrical Contractor A	21	\$75	\$240
Corporation Electrical Contractor AC	32	NO TEST	\$200
Limited Electrician / Manufacturers C	23	NO TEST	\$240
Limited Electrician / Non-Manufacturers D	24	NO TEST	\$240
Burner Contractor E	25	\$ 75	\$240
Corporation Oil Burner Contractor EC	33	NO TEST	\$200
Burner Person License F	26	\$75	\$72
Fire Alarm Contractor AF (FIRE)	30	\$75	\$240
Corporation Fire Alarm Contractor AFC	34	NO TEST	\$200
Fire Alarm Installer BF (FIRE)	31	\$75	\$72
Electrical Sign Contractor SCF Electrical	28	\$75	\$240
Sign Installer CF	29	\$75	\$72
Sign Contractor Lightning Protection	35	NO TEST	\$200
Contractor LPC Lightning Protection	125	\$75	\$200
Installer LPI	126	\$75	\$72
<b><u>OUT-OF-STATE APPLICANTS:</u></b>			
Journeyman Electrician B	22	\$75	\$72
Limited Maintenance Journeyman M	124	\$75	\$72
<b><u>APPRENTICES:</u></b>			
Apprentices Renewal one year only			
Apprentice (Oil Burner)	27.1	NO TEST	\$20
Apprentice (Fire Alarm)	27.2	NO TEST	\$20
Apprentice (Sign Installer) Apprentice	27.3	NO TEST	\$20
(Lightning Protection)	27.4	NO TEST	\$20

\*Individuals who achieve a passing score of 70 or greater will be invoiced for the License Fee.





**ELECTRICIANS — APPLICATION FOR EXAMINATION AND APPRENTICESHIP**

**Application Must be Printed CLEARLY**

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Full Name (Last, First + Middle Initial): \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home or Mobile Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Exam Applying For: \_\_\_\_\_ Computer Code: \_\_\_\_\_  
 Do you need this exam in a language other than English?    Yes    No    If yes, what language?

Employer: \_\_\_\_\_  
 If Self Employed, Company Name: \_\_\_\_\_  
 Employer Address: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Employer Telephone: \_\_\_\_\_

Applicant must answer all questions on both pages truthfully and swear to the same before a NOTARY PUBLIC. Penalties for false information are as itemized in the General Laws of Rhode Island and Addendum. Statement may be investigated and verified for truthfulness.

**General Listing of Work History:**

1. Name of Employer: _____	Type of Work: _____
• Dates Worked: From: _____	To: _____
2. Name of Employer: _____	Type of Work: _____
• Dates Worked: From: _____	To: _____
3. Name of Employer: _____	Type of Work: _____
• Dates Worked: From: _____	To: _____

**Education** - List all education and schooling that you have received in the electrical trade.

1. Location: _____	Degree/Diploma: _____
• Dates Attended: From: _____	To: _____
2. Location: _____	Degree/Diploma: _____
• Dates Attended: From: _____	To: _____
3. Location: _____	Degree/Diploma: _____
• Dates Attended: From: _____	To: _____

You must list any VALID LICENSES YOU NOW HOLD with the Department of Labor and Training.

1. Type of License: \_\_\_\_\_ 2. Type of License: \_\_\_\_\_ 3. Type of License: \_\_\_\_\_

Listed employers or customers may be sent forms to attest to the truthfulness of all statements on this application and these will have to be sent back to this division, properly notarized, before any action is taken on this licensing test application.

### Public Notary Acknowledgement

In \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
before me personally appeared \_\_\_\_\_ to me known and known by me to be the party(ies)  
executing the foregoing instrument, and he/she/they acknowledged said instrument, by him/her/they executed by them as their  
free act and deed.

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

Notary Signature and Seal: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Submit ONLY this page and the prior page with required documents to:

Rhode Island Department of Labor and Training  
Division of Workforce Regulation and Safety  
Professional Regulation Unit  
PO Box 20247  
Cranston, RI 02920-0943  
Telephone (401) 462-8580 | Fax (401) 462-8528

FOR OFFICE USE ONLY – PLEASE DO NOT WRITE IN THIS AREA

Test Fee Paid: CHECK CREDIT MO Division/Commission Approval for Test

Comments / Date Approved: \_\_\_\_\_

Date Paid: \_\_\_\_\_