



**RI Department of Labor and Training
Workforce Regulation and Safety Division
Professional Regulation**

Certificate of Completion

for 15 hours 2017 NEC Code Update

Licensee's Name: _____ Master Electrician: _____

Street Address: _____ Journeyman License: _____

City: _____ Date Issued: _____

State/Zip: _____ Name of School: _____

Provider Name: _____ Provider License Number: _____

Signature of Provider: _____ Instructor Signature: _____

SECTION 5-6-20.1
Instructors or inspectors shall be Rhode Island licensed electrical contractors
Electrical contractors Number A-_____



MUST SUBMIT ORIGINAL