

DL State _____ Driver's License # _____

Date of Birth: (mo/day/yyyy) ____/____/____

Payment Amount \$0.00 _____

ET#: T _____

**APPLICATION FOR RENEWAL OF REGISTRATION OF
ELECTRICIAN TRAINEE**

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

Name must match U. S. Drivers License or State ID:

Please PRINT or type all information in INK

Mailing Address: _____

City: _____ County: _____

State: _____ Zip: _____ - _____ E-Mail: _____

Day Phone: _____ Evening Phone: _____

NOTE: You must attach a current proof of enrollment and an unofficial transcript or verification of completion of courses during the prior year or this application will not be processed.

Check **one box** and **enter school number and name** below:

I certify that I am Enrolled in or have Completed an Electrician Trainee Approved Curriculum at:

Use the School Number listed on our website at <http://www.dir.ca.gov/dlse/ECU/ListOfApprovedSchools.html>

School No.: 109 School Name (printed): Eden Area ROP

Current Electrical Employer (if any) Name: _____

Address: _____

City: _____ State: _____ Zip: _____ - _____

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

Hours: _____ (Hours of experience with this employer.)

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

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

Signature: _____ Date: _____

Submit form with **original** signature and keep a copy for your records. Incomplete applications will NOT be approved. There is no fee for Electrician Trainee annual renewal. Mail this completed form with all required attachments to:

**DIR-Division of Labor Standards Enforcement Attn: Electrician Certification Unit
PO Box 511286 Los Angeles, CA 90051-7841**