

ELECTRICAL APPRENTICE INITIAL OR RENEWAL REGISTRATION APPLICATION

☐ FIRE ALARM

APPLICANT-PLEASE CHECK ONE \downarrow

■ ELECTRICAL

PASSPORT-SIZED

PICTURE

FOR INITIAL REGISTRATION ONLY

FALSIFICATION IN FILLING OUT THIS APPLICATION IS SUFFICIENT CAUSE FOR REFUSAL TO ISSUE A REGISTRATION. DO NOT SUBMIT PREVIOUS VERSIONS OF THIS FORM WHICH ARE OBSOLETE PRIOR TO THIS REVISION. OBSOLETE FORMS WILL NOT BE ACCEPTED.
EFFECTIVE SEPTEMBER 1, 2010, ALL ELECTRICAL APPRENTICES ARE REQUIRED TO BE PARTICIPATING IN AN ELECTRICAL TRAINING PROGRAM APPROVED BY THE ELECTRICAL ADMINISTRATIVE BOARD AS STIPULATED IN <i>PUBLIC ACT 407 OF 2016</i> . FAILURE TO DO SO INVALIDATES THIS REGISTRATION. ANY HOURS ACCUMULATED ON AN INVALID REGISTRATION WILL NOT BE CREDITED TOWARDS THE JOURNEYMAN ELECTRICIAN EXAMINATION.

S	NOT BE CREDITED TOWARDS THE JOURNEYMAN ELECTRICIAN EXAMINATION.		
E	TOD AVIO DATE		
C	TODAY'S DATE:		
T	APPLICANT'S NAME:		
Ī	ATTECANT S NAME.		
_	DATE OF BIRTH:AGE:		
0			
N	TELEPHONE NUMBER:		
A	E-MAIL ADDRESS:		
	PRESENT ADDRESS: ZIP CODE:		
	PRESENT ADDRESS:ZIP CODE:		
	I AM CURRENTLY ENROLLED IN: LOCAL 58 (SKIP TO SECTION C ↓)		
	OTHER (CONTINUE TO SECTION B)		
S	NOTE TO EMPLOYERS: THE ELECTRICAL APPRENTICE YOU ARE SIGNING FOR ON THIS APPLICATION MUST BE A		
E	CURRENT EMPLOYEE OF YOUR COMPANY.		
$\overline{\mathbf{C}}$	Buildings, Safety Engineering		
\mathbf{T}	Dunuings, surety Engineering		
	CURRENT EMPLOYER: 2 & Environmental Department		
I	de anivironimentali Department		
O	EMPLOYER'S ADDRESS:		
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	DETROIT		
В	EMPLOYER'S PHONE NO.:		
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	CITA DIVING DA IEL OF EN IN OVA MINIT		
	STARTING DATE OF EMPLOYMENT: THIS DATE IS SUBSTANTIATED WITH THE ATTACHED LETTERS FROM PREVIOUS AND/OR CURRENT EMPLOYER.		
	The state of the s		
	EMPLOYER'S SIGNATURE:		
	ENI BOTEK S SIGNATURE.		
S	I certify that I have read and understand the licensing requirements that accompany this application and that the statements		
E	made as part of this application are true, complete, and correct and that no material information has been omitted. By signing the		
\mathbf{C}	box below, I understand and agree that I am bound by the information on this application. APPLICANT'S PRINTED NAME:		
	APPLICANT S PRINTED NAME:		
T			
Ι	APPLICANT'S SIGNATURE:		
0	THE DIGITAL STATE OF THE STATE		
N			
C	TODAY'S DATE:		
C			

SIGNATURES OF THE ELECTRICAL EXAMING BOARD:		
BOARD MEMBER:	APPROVAL DATE:	
1.		
2.		
3.		
4.		
5.		
6.		
7.		

SECTION D: FOR ELECTRICAL PERSONNEL ONLY

Registration Approval Stamp:



Buildings, Safety Engineering & Environmental Department