



STATE OF CALIFORNIA DEPARTMENT OF INDUSTRIAL
RELATIONS DIVISION OF LABOR STANDARDS ENFORCEMENT

ELECTRICIAN CERTIFICATION EXAM
ENGLISH LANGUAGE LEARNER (ELL) ACCOMMODATION REQUEST

Name: _____ Driver's License State: Select DL State
Email Address: _____ Driver's License #: _____
Mailing Address: _____
City: _____ State: Select State Zip: _____

Exam(s) Approved by the Labor Commissioner's Electrician Certification Unit (ECU) *(select one or more exams):*

- | | |
|--|---|
| ☐ General Electrician | ☐ Voice Data Video Technician |
| ☐ Residential Electrician | ☐ Nonresidential Lighting Technician |
| ☐ Fire/Life Safety Technician | |

ELL
Accommodation
Requested (specify): _____

Reason for
Request (specify): _____

THIS ACCOMMODATION REQUEST IS FOR AN EXAMINATION ONLY

Applicants requesting ELL testing accommodations must complete this form and submit documentation on official letterhead from an educational institution, employer, training provider, English as a Second Language (ESL) program, or other qualified organization verifying that English is not the candidate's primary language and an explanation supporting the requested accommodation. If completing the hard copy of this form and more space is needed, attach additional sheets. This form and any supporting documentation will be kept confidential.

Please email a completed copy of this form and required supporting documentation to CPS HR Consulting at ecuexams@cpshr.us.

For reasonable accommodation requests in accordance with the American with Disabilities Act (ADA) of 1990 and the California Fair Employment and Housing Act (Government Code §12900-12996), please do not complete this form. Complete and submit the form titled [Reasonable Accommodation Request](#). Accommodation requests may **take up to 30 days** to review after all required documentation has been received.

IMPORTANT: Do not schedule your examination until your accommodation request has been reviewed and you have received notification from CPS HR Consulting regarding your request.

Type or Print Name

Signature of Requester

Date