

DL State _____ Driver's License # _____
Date of Birth: (mo/day/yyyy) ____/____/____
Payment Amount \$ _____
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 <input type="checkbox"/> am Enrolled in or <input type="checkbox"/> 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.: _____ School Name (printed): _____
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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.)
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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**