



STATE OF IDAHO DIVISION OF OCCUPATIONAL &
PROFESSIONAL LICENSES

1090 East Watertower Street, Suite 150
Meridian, Idaho 83642
Ph: 800-955-3044
dbs.idaho.gov
customer.service@dbs.idaho.gov

APPLICATION FOR ELECTRICAL APPRENTICE WORK REGISTRATION

***YOU MUST PROVIDE A COPY OF LEGAL IDENTIFICATION (Driver's license, Passport, Military ID)**

An applicant who is or has been previously licensed as a journeyman or master electrician in any recognized jurisdiction shall not be issued electrical apprentice registration. The applicant may apply for the Electrical Journeyman license or Provisional Journeyman license.

To qualify for registration as an Electrical Apprentice, an applicant must:

- Be at least 16 years of age.
- Submit a completed notarized application (included).
- Pay the \$15 (non-refundable) license registration fee.

To advance to the next level of apprenticeship the applicant shall show proof of the following:

Apprentice: This is a first-time registration or a registration renewal of an individual who does not have the education and hours necessary to advance to Apprentice level 1. This person cannot have previously held a journeyman or master electrician license from a recognized jurisdiction.

Apprentice level 1: Is a registered apprentice who has submitted proof of completion of 2000 hours of verified work experience and completion of 1 year of an approved school.

Apprentice level 2: Is a registered apprentice who has submitted proof of completion of 4000 hours of verified work experience and completion of 2 years of an approved school.

Apprentice level 3: Is a registered apprentice who has submitted proof of completion of 6000 hours of verified work experience and completion of 3 years of an approved school.

Apprentice level 4: Is a registered apprentice who has submitted proof of completion of 8000 hours of verified work experience and completion of 4 years of an approved school. Apprentice level 4 are qualified to test for the Idaho Journeyman examination.

Any apprentice who can show proof of 16,000 hours of verified work experience is qualified to test for the Idaho Electrical Journeyman exam.



STATE OF IDAHO DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSES

1090 East Watertower Street, Suite 150
Meridian, Idaho 83642

Ph: 800-955-3044

Fax: 877-810-2840

dbs.idaho.gov

customer.service@dbs.idaho.gov

Please Note: Registration as an Electrical Apprentice is issued for a period of one (1) year. Hours will be credited only so long as the apprentice is actively registered with the Division of Occupational & Professional Licenses. All hours shall be obtained while working under the constant on the job supervision of a journeyman electrician. All hours shall be obtained while working for a licensed Electrical Contractor, Facility Account or other entity legally authorized to make electrical installations.

Registration as an apprentice is not the same as a license or certificate of competency. No level of competence is implied by a registration.

For requirements to test for the Electrical Journeyman license see IDAPA 07.01.01.

IDAHO ELECTRICAL BOARD AND IDAHO CTEC APPROVED ELECTRICAL APPRENTICESHIP SCHOOLS

College of Southern Idaho	(800) 680-0274
College of Western Idaho	(208) 562-2700
College of Eastern Idaho	(208) 535-5345
Idaho State University	(208) 282-4636
IEC Idaho	(208) 608-4662
Lewis Clark State College	(208) 792-2220
North Idaho College	(208) 769-7735
Southwest Idaho Electrical JATC*	(208) 384-0538
Eastern Idaho Electrical JATC*	(208) 232-4300
DC Electric Inc.	(208) 552-1911
Treasure Valley Community College - Ontario location only	(541) 881-8822
Porter House Inc. - Shelley Adult Training Academy and Mountain Home Adult Training Academy	(208) 522-4336
Faith Technologies Incorporated	(920) 225-6644

*Joint Apprenticeship and Training Committee



STATE OF IDAHO DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSES

1090 East Watertower Street, Suite 150
Meridian, Idaho 83642
Ph: 800-955-3044
dbs.idaho.gov
customer.service@dbs.idaho.gov

APPLICATION FOR ELECTRICAL APPRENTICE WORK REGISTRATION

*YOU MUST PROVIDE A COPY OF LEGAL IDENTIFICATION (Driver's license, Passport, Military ID)

PLEASE PRINT *REQUIRED FIELD

*Applicant's Legal Name: _____ *Date of Birth: _____

*Mailing Address: _____

*City: _____ *State: _____ *Zip Code: _____

*Social Security Number: _____

*Contact Phone Number(s): _____

*E-Mail Address: _____
(All future notifications will be done via email.)

*Have you ever held an electrical license in another jurisdiction? No _____ Yes _____
If Yes, attach a copy of the license.

Please be advised that the DOPL shall consider the address provided by the applicant on this form as the business address of record for the applicant, which is subject to public disclosure. Said address will be used as such for the purposes of all correspondence from the DOPL with the license/registration holder, as well as for the purposes of the Idaho Public Records Act. By providing this business address and submitting this application the successful applicant is considered by the Division to have acknowledged that DOPL may disclose the address as a public record, and the applicant provides his/her consent to do so. As the DOPL will utilize the address provided on this form for any official correspondence with the license or registration holder, please be sure to provide an address that will be accurate for the duration of license or registration period.

I also hereby authorize the Idaho Division of Occupational and Professional Licenses to release the last 4 (four) numbers of my Social Security Number for verification purposes.

I certify the information above is correct.

*Signature: _____ *Date: _____

THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC

State of _____

The above individual appeared before me this _____ day of _____, 20_____

NOTARY SEAL:

Signature of Notary Public _____

Commission Expires: _____



STATE OF IDAHO DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSES

1090 East Watertower Street, Suite 150
Meridian, Idaho 83642
Ph: 800-955-3044
dbs.idaho.gov
customer.service@dbs.idaho.gov

ELECTRICAL WORK VERIFICATION FORM

(Please submit a separate form for each employer)

SELF-VERIFICATION WILL NOT BE ACCEPTED

Applicant's Legal Name: License # if required:

Employer/Contractor: License # if required:

Address:

City: State: Zip Code:

E-Mail Address: Telephone Number:

Supervising Electrician: License Number:

Dates of Verification: From: (month/day/year) To: (month/day/year)

Total hours performing electrical work for this employer for the time period noted above:

Are the above dates taken from payroll records: Yes No If No, please explain:

Were all jobs where the applicant worked inspected by a governmental authority: Yes No
(Governmental Authority example: State Electrical Inspector/City Inspector)

If No, please explain:

Was this work done in the State of Idaho? No Yes State
(If the work was performed in multiple States, a separate verification form is needed for each State. Listed license and Registration Numbers must reflect the State in which the work was performed.)

Employer's Authorized Signature

Date

THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC

State Of

The above individual appeared before me this day of , 20

NOTARY SEAL:

Signature of Notary Public

Commission Expires:



CREDIT CARD AUTHORIZATION FORM

Idaho Division of Occupational & Professional Licenses
1090 E. Watertower St. Suite 150
Meridian, ID 83642
Phone: 1-800- 955-3044 Fax: 1-877- 810-2840
Email: customer.service@dbs.idaho.gov

I _____, authorize The State of Idaho,
(Please Print Card Holders Name)

Division of Occupational & Professional Licenses to charge my credit/debit card account in the amount of
\$ _____

*Please note there is an additional 3% charge for the use of your card through Access Idaho.

This payment is for:

- License Application Fee, License Renewal Fee, New License Fee, New Permit Fee, Fee Due on Existing Permit, Other

Cardholder Signature, Date, Contact Phone Number, Email Address for Receipt (Optional)

All Fields Below Are Required
Credit/Debit Card Number:
Expiration Date:
Billing Address Zip Code:
*Your card information will not be retained for future transactions