



TEXAS DEPARTMENT OF LICENSING AND REGULATION  
PO Box 12157 • Austin, Texas 78711-2157  
(800) 803-9202 • (512) 463-6599 • FAX (512) 475-2871  
www.tdlr.texas.gov • cs.electricians@tdlr.texas.gov

## JOURNEYMAN ELECTRICIAN LICENSE APPLICATION INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in black ink. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Use a paperclip to fasten all pages together, with the check or money order on top. **Do not use staples.**

**DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.**

1. NAME – Write your legal name in the spaces provided. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and III. (Mr. is not a suffix.)
2. DATE OF BIRTH – Write your birthdate.
3. GENDER – Select whether you are male or female.
4. SOCIAL SECURITY NUMBER – Social Security number disclosure is required by Section 231.302(1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:

[www.oag.state.tx.us/child/index](http://www.oag.state.tx.us/child/index) or call (512) 460-6000 or (800) 252-8014.

5. MAILING ADDRESS – Write your current mailing address. This is the address where we will send you mail. A post office box can be used as a mailing address. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
6. PHYSICAL ADDRESS – This is the physical location of your residence. Do not use a post office box for this address.
7. PHONE NUMBER – Write a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
8. EMAIL ADDRESS – Write your email address. By providing my email address I authorize TDLR to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law.
9. CRIMINAL HISTORY – Indicate if you have ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation. If YES, complete and attach a Criminal History Questionnaire for each offense. This form can be obtained from the TDLR website at [www.tdlr.texas.gov/MISC/lic002.pdf](http://www.tdlr.texas.gov/MISC/lic002.pdf)

If you are worried your criminal history could prevent you from getting this license, Texas allows you to have your criminal history evaluated before submitting your application and non-refundable fees. To request a criminal history evaluation, submit a Criminal History Evaluation Letter, a completed Criminal History Questionnaire form for each crime you were convicted of, or placed on deferred adjudication for, and a \$25 fee. You can find more information on the process and download the necessary forms on the TDLR website at [www.tdlr.texas.gov/crimHistoryEval.htm](http://www.tdlr.texas.gov/crimHistoryEval.htm)

10. DISCIPLINARY ACTION HISTORY – Indicate if you have ever had an occupational license, certification, or registration suspended, revoked, or denied in any state. If you have, complete and attach a Disciplinary Action Questionnaire for each disciplinary action. This form can be obtained from the TDLR website at [www.tdlr.texas.gov/misc/DisciplinaryActionQuestionnaire.pdf](http://www.tdlr.texas.gov/misc/DisciplinaryActionQuestionnaire.pdf)
11. LICENSING REQUIREMENTS - You must have at least 8,000 hours of on-the-job training under the supervision of a master electrician prior to taking the exam. When your experience has been approved, PSI will mail you a postcard with information on how to schedule your exam. The employment history portion of the application must include the full 8,000 hours. An Experience Verification Form is required for each employer and must be signed by the supervising master electrician.

12. STATEMENT OF APPLICANT - Carefully read the statement of applicant before you sign and date your application.
13. EMPLOYMENT HISTORY - If you are applying for licensure by experience and exam, you will need to complete all portions of the employment history indicating your 8,000 on-the-job training hours under the supervision of a master electrician. All areas of this document must be completed.
14. EXPERIENCE VERIFICATION FORM - An Experience Verification Form or letter on company letterhead must be completed and signed by the supervising master electrician. This form along with the Employment History portion of the application must match. Make additional copies of the Experience Verification form as needed.

If you are licensed as a journeyman electrician by a municipal or regional licensing authority, you do not need to provide any experience with this application. Include a copy of your journeyman electrician license issued by the municipal or regional licensing authority. You must also include a Discontinued Municipal or Regional Licensing Program Form.

**APPLICATION INFORMATION FOR MILITARY SERVICE MEMBERS, MILITARY VETERANS AND MILITARY SPOUSES**

The Texas Department of Licensing and Regulation recognizes the contributions of our active duty military service members, their spouses, and veterans. If you want to use one of the licensing options available to military service members, military veterans and military spouses, please complete the **Military Service Member, Military Veteran or Military Spouse Supplemental Application (TDLR form MIL001)** and attach it with your license application. The form is located on the TDLR website at: <http://www.tdlr.texas.gov/misc/militarysupplemental.pdf>.

If you have additional questions about qualifications, training or experience requirements relating to occupation licensing for military service members, military veterans or military spouses please go to the TDLR Military Information web page at: <http://www.tdlr.texas.gov/military.htm>.

State law prohibits renewing a license more than once after a licensee has defaulted on a student loan guaranteed by the **Texas Guaranteed Student Loan Corporation (TGSLC)** unless the licensee has entered into a repayment agreement with TGSLC. YOU SHOULD CONTACT TGSLC BEFORE FILING THIS APPLICATION if you have defaulted on a student loan. An application or renewal may be rejected if this agency has received information from TGSLC that the applicant has defaulted on a student loan. The Texas Guaranteed Student Loan Corporation can be contacted at: **Texas Guaranteed ATTN: Collections, PO Box 83100, Round Rock, TX 78683-3100, Telephone: (800) 222-6297, <http://www.tgslc.org> or email: [cust.assist@tgslc.org](mailto:cust.assist@tgslc.org).**



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## JOURNEYMAN ELECTRICIAN LICENSE APPLICATION

### Do Not Write Above This Line

You must submit this completed application to TDLR before scheduling your Texas examination. If your application is approved, we will contact the exam provider (PSI) and they will send you a postcard to schedule your Texas exam.

YOU MUST MEET ALL REQUIREMENTS WITHIN 12 MONTHS OF THE FILING DATE, OR THE APPLICATION WILL BE TERMINATED.

**APPLICATION FEE: \$30 (FEE IS NON-REFUNDABLE)**

**1. Name:**

\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle Name \_\_\_\_\_ Suffix \_\_\_\_\_

**2. Date of Birth:**

\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 Month Day Year

**3. Gender:**

Male  Female

**4. Social Security Number:**

(See instruction sheet for disclosure information)

\_\_\_\_\_

**5. Mailing Address:** (PO box can be used for this address)

Number, Street Name, Suite Number/Apartment Number

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**6. Physical Address:** (PO box cannot be used for this address)

Number, Street Name, Suite Number/Apartment Number

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**7. Phone Number:**

(\_\_\_\_) \_\_\_\_\_  
 Area Code Phone Number

**8. Email Address:**

\_\_\_\_\_ Email address (ex: johndoe@aol.com) (See Instruction sheet for disclosure information)

**9. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation?**

Yes  No

If YES, complete and attach a Criminal History Questionnaire for each offense.

See instruction sheet for more information

**10. Have you ever had an occupational license, certification or registration suspended, revoked, or denied in any state?**

Yes  No

If YES, attach a Disciplinary Action Questionnaire to this application. (This does not include your driver license.)

**11. LICENSE REQUIREMENTS**

To qualify for a Journeyman Electrician License, you must meet either A or B below:

- A.**
- Passed the Texas Journeyman Electrician Exam,
  - Completed at least 8,000 hours of on-the-job training under the supervision of a master electrician.

Note: Completed application must include the Experience Verification Form (or letters from previous supervisors) and the Employment History portion of the application.

**B.**

- Held a journeyman electrician license issued by a Texas municipality or region that has elected to discontinue issuing or renewing licenses.
- Held the municipal or regional license for the preceding year.
- Submit your application within 90 days of the date the municipality or region stops issuing or renewing licenses.

Note: The Discontinued Municipal or Regional Licensing Program Form must be completed and attached to this application.

**12. STATEMENT OF APPLICANT**

I certify that I have read and will comply with all applicable provisions of the Electrician Act; Texas Occupation Code, Chapter 1305 and Chapter 51; Texas Administrative Code, Chapter 60; and the Electricians Administrative Rules, Texas Administrative Code, Chapter 73. I understand that providing false information on this application may result in denial of this application and/or revocation of the license I am requesting and the imposition of administrative penalties.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Applicant

**13.**

**EMPLOYMENT HISTORY**

Indicate below your employment history for each employer. You can make additional copies of this form and attach them if needed. For each employment period, you must provide either a letter from the master electrician who supervised your on-the-job training or a completed Experience Verification Form. The Department may contact your licensed supervisor for verification.

**Name:** (As it appears on your original application)

\_\_\_\_\_

Last First Middle Name Suffix (JR, SR, III)

**Social Security Number:**  
(See instruction sheet for disclosure information) \_\_\_\_\_

<b>Employer Name:</b>	<b>Employer's Phone Number:</b>
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<b>Employer's Address:</b>	<b>Dates of Employment:</b>
Number, Street Name, Suite Number	<b>From:</b> _____ <b>To:</b> _____
City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip Code</span>	

<b>Total Years or Hours of Experience:</b>	<b>Master Electrician's Name:</b>
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**Master Electrician's License Number and Issuing Jurisdiction:**

\_\_\_\_\_

License Number Issuing Jurisdiction

**Describe job duties performed:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>Employer Name:</b>	<b>Employer's Phone Number:</b>
-----------------------	---------------------------------

<b>Employer's Address:</b>	<b>Dates of Employment:</b>
Number, Street Name, Suite Number	<b>From:</b> _____ <b>To:</b> _____
City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip Code</span>	

<b>Total Years or Hours of Experience:</b>	<b>Master Electrician's Name:</b>
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**Master Electrician's License Number and Issuing Jurisdiction:**

\_\_\_\_\_

License Number Issuing Jurisdiction

**Describe job duties performed:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**14. ELECTRICIAN EXPERIENCE VERIFICATION FORM**

**THIS FORM MUST BE COMPLETED BY A PERSON QUALIFIED TO VERIFY ELECTRICIAN EXPERIENCE WHOM THE DEPARTMENT MAY CONTACT FOR VERIFICATION.**

**Applicant's Name:**

\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle Name \_\_\_\_\_ Suffix \_\_\_\_\_

**Master Electrician Name:**

\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_

**Phone Number:**

(\_\_\_\_\_) \_\_\_\_\_  
 Area Code Phone Number

**Company Name:**

**Your Electrician License Information:** (Copy or letter of verification required for out of state licenses)

\_\_\_\_\_ License Type (Master, Etc.) \_\_\_\_\_ License Number \_\_\_\_\_ Effective Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

**State, County, or Municipality Issuing License:**

\_\_\_\_\_

**Period You Supervised Applicant:**

\_\_\_\_\_ To \_\_\_\_\_  
 Start Date (month/day/year) End Date (month/day/year)

**Did you supervise the electrical work of the applicant during the above dates?**  Yes  No

**Did the applicant hold a valid license during the dates listed above?**  Yes  No

**If YES, what was the license type?** \_\_\_\_\_

**Choose the correct type of work performed by this applicant:**

Installed Electrical Wiring System  
 Residential  Commercial  Industrial  Exempt  Other \_\_\_\_\_

Maintained Electrical Wiring System  
 Residential  Commercial  Industrial  Exempt  Other \_\_\_\_\_

Extended an Electrical Wiring System  
 Residential  Commercial  Industrial  Exempt  Other \_\_\_\_\_

Serviced Entrance Conductors  
 Residential  Commercial  Industrial  Exempt  Other \_\_\_\_\_

**Detailed Description of work performed:**

\_\_\_\_\_  
 \_\_\_\_\_

**STATEMENT OF SUPERVISOR**

**TEXAS LICENSED EMPLOYER STATEMENT:** As a licensee of The Texas Department of Licensing and Regulation, I have only verified actual experience (number of hours and duties) that this applicant received while working under my license and general supervision. I understand that I may be subject to disciplinary action up to and including revocation of my license if I verify experience other than that which was performed while the applicant was working under my license and supervision.

**BY SIGNING THIS FORM, I CERTIFY THAT THE INFORMATION ON THIS FORM IS TRUE AND CORRECT.**

\_\_\_\_\_ Date Signed

\_\_\_\_\_ Signature of Master Electrician