



TEXAS DEPARTMENT OF LICENSING & REGULATION
P.O. Box 12157 • Austin, Texas 78711-2157
www.tdlr.texas.gov

JOURNEYMAN ELECTRICIAN LICENSE APPLICATION INSTRUCTIONS

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** – Provide 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** – Provide 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(c) (1) of the Texas Family Code 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](#) or call (512) 460-6000 or (800) 252-8014.
5. **MAILING ADDRESS** – Provide your 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** – Provide 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** – Provide your email address only if you agree to the following statement. By providing my email address, I authorize the Texas Department of Licensing and Regulation, (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 \(PDF\)](#) for each offense. 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 \(PDF\)](#), a completed [Criminal History Questionnaire \(PDF\)](#) form for each crime you were convicted of, or placed on deferred adjudication for, and a \$10.00 fee. You can find more information on the process and download the necessary forms on the [TDLR website](#).
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 completed and attached a [Disciplinary Action Questionnaire \(PDF\)](#) for each disciplinary action.
11. **TEXAS ELECTRICAL APPRENTICE LICENSE** – Indicate if you currently have or have held a Texas Electrical Apprentice License.
12. **LICENSING REQUIREMENTS** – You must have at least 8,000 hours of on-the-job training under the supervision of a master electrician to receive a license. 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.
13. **EARLY EXAM OPTION** – This option is for those who have completed at least 7,000 hours of on-the-job training under the supervision of a master electrician and wish to test early.
14. **STATEMENT OF APPLICANT** – Carefully read the statement of applicant before you sign and date your application.
15. **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 job duties under the supervision of a master electrician. All areas of this document must be completed.

16. **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 \(PDF\)](#) 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 \(PDF\)](#) and attach it with your licensing application.

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.

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

TDLR
P.O. Bo 12157
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, please visit the [TDLR website](#). You can request assistance or submit required attachments via [TDLR webform](#) or Fax: (512) 475-2871. You may contact Customer Service Representatives by calling (800) 803-9202 (in state only) or (512) 463-6599; Relay Texas - TDD: (800) 735-2989. Customer Service Representatives are available Monday through Friday Central Time (excluding holidays).



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 - Austin, Texas 78711-2157

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JOURNEYMAN ELECTRICIAN LICENSE APPLICATION

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: \$30.00 (FEE IS NON-REFUNDABLE)

| | | | |
|---|---|---|--------|
| 1. Name: | | | |
| _____ | _____ | _____ | _____ |
| Last | First | Middle | Suffix |
| 2. Date of Birth: | 3. Gender: | 4. Social Security Number: | |
| _____/_____/_____ Month/Day/Year | <input type="checkbox"/> Male <input type="checkbox"/> Female | _____ (See instruction sheet for disclosure information) | |
| 5. Mailing Address: (P.O. Box can be used for this address) | | | |
| _____ Number, Street Name, Suite Number/Apartment Number, City, State, Zip Code | | | |
| 6. Physical Address: (P.O. Box cannot be used for this address) | | | |
| _____ Number, Street Name, Suite Number/Apartment Number, City, State, Zip Code | | | |
| 7. Phone Number: | 8. Email Address: | | |
| _____ (Area Code) Phone Number | _____ Email address (ex: johndoe@gmail.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? | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If YES, complete and attach a Criminal History Questionnaire (PDF) 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? | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If YES, attach a Disciplinary Action Questionnaire (PDF) to this application. (This does not include your driver license.) | | | |
| 11. Do you hold or have you held a Texas Electrical Apprentice License? | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If yes, provide the license number: _____ | | | |

12. 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 municipally or the 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 License Program Form must be completed and attached to this application.

13.

EARLY EXAMINATION OPTION

This method allows applicants who are ready to take the exam for various reasons (taken training courses or study classes, etc.) to take the exam early.

You may submit at least 7,000 hours of on-the-job training under the supervision of a master electrician AND when approved by the Department, you will then be eligible to take the exam.

CHECK THIS BOX if you are or have been enrolled in a Texas apprenticeship training program.

CHECK THIS BOX if you choose to apply to take the exam early AND you have attached at least 7,000 hours.

You will have one year from the date of this application to submit the additional hours. Your license will NOT be issued until all 8,000 hours have been approved by the Department, and you have successfully passed the exam. However, after 7,000 hours have been approved by the Department, you will then be eligible to take the exam after being notified by PSI.

14.

STATEMENT OF APPLICANT

I certify that I will comply with all applicable laws and rules related to my licensed occupation or profession. I further certify that all information I have provided is true and correct. I understand that providing false information may result in denial of this application and/or revocation of the license.

Date Signed

Signature of Applicant

15.

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 applications) _____ Last, First, Middle Name, Suffix (Sr., Jr., III) | Social Security Number: _____ (See instruction sheet for disclosure information) |
|---|---|

| | |
|--------------------------------|--|
| Employer Name: _____ | Employer's Phone Number: _____ |
|--------------------------------|--|

Employer's Address:

Number, Street Name, Suite Number, City, State, Zip Code

Master Electrician's Name:

Master Electrician's License Number and Jurisdiction:
_____ License Number _____ Issuing Jurisdiction

Describe Job Duties Performed:

| | |
|---|---|
| Name: (As it appears on your original applications) _____ Last, First, Middle Name, Suffix (Sr., Jr., III) | Social Security Number: _____ (See instruction sheet for disclosure information) |
|---|---|

| | |
|--------------------------------|--|
| Employer Name: _____ | Employer's Phone Number: _____ |
|--------------------------------|--|

Employer's Address:

Number, Street Name, Suite Number, City, State, Zip Code

Master Electrician's Name:

Master Electrician's License Number and Jurisdiction:
_____ License Number _____ Issuing Jurisdiction

Describe Job Duties Performed:

16. 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 (Jr., Sr., III)

Master Electrician's Name:

Last, First Name

Phone Number:

(Area Code) Phone Number

Company Name:

Your Electrician License Information: (Copy or letter of verification required)

License Type (Master, etc.) _____ License Number _____ Effective Date (month/day/year) _____ Expiration Date (month/day/year) _____

State, Country, or Municipality Issuing License:

Period You Supervised Applicant:

_____ to _____
Start Date (month/day/year) End Date (month/day/year)

Number of hours worked during this time period: _____

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