

SOUTH DAKOTA STATE ELECTRICAL COMMISSION

118 W Capitol
Pierre, South Dakota 57501-5070
Phone (605) 773-3573 or 1-800-233-7765
Fax (605) 773-6213

NOTE: Be sure to *sign* and *date*
the bottom of this application.
Fee must accompany application.

Application for an Apprentice's License

This application must be typewritten or printed in ink. Complete all spaces. If the question does not apply, write "none" in the blank space. Failure to answer questions may cause the application to be returned. All licenses expire June 30th of the even numbered years.
Fees are not pro-rated. Application process takes at least 30 days.

Name _____ Social Security Number _____

Mailing Address _____
Street or PO Box City County State Zip

Day Phone # _____ Home Phone # _____ Mobile Phone # _____

Age _____ Date of Birth _____ Place of Birth: (city) _____ State _____

Present Employer _____ His State License # _____

License Information

Have you ever been issued an electrical license? _____

Where? _____

State the type and number of license _____

Inforce from 19 _____ to 19 _____

Apprentice Electrician Fee -- \$20 (Make check of money order payable to the State Electrical Commission)

Every Application must be signed

I do solemnly swear that statements made herein are true and correct to the best of my knowledge and belief.

Date _____

Signature _____