

ELECTRICAL EMPLOYMENT VERIFICATION RECORD

FORM MUST BE COMPLETED BY EMPLOYER

Instructions: Each employer must verify work experience separately. Please make copies of this form as necessary. This form will not be accepted without notarization.

1. Name of Applicant: _____ Last 4 of SSN: _____

Applicant Address: _____

2. Name of Electrical Contracting Business: _____

Address _____ City _____ State _____

Master Name & License Number _____ Phone #: (____) _____

3. Position held by the above applicant: _____

4. Dates of employment: from _____ to _____ Full Time: _____ Part Time: _____

Total number of hours of electrical work: _____

5. Are the above dates taken from your payroll record? _____ Yes _____ No

If no, please explain _____

6. 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 _____

7. Was **all** work completed in State of North Dakota? _____ Yes _____ No – **if no, complete “required” section below.**

REQUIRED: Attach a list of the jobs that **were not in North Dakota**, total hours worked at that job, if a license was required, and if inspections were performed by governmental authority.

EXAMPLE:

JOB NAME:	HOURS:	LICENSE REQUIRED:	INSPECTIONS PERFORMED:
Department Store, Anytown, USA	1500	Yes	Yes
Gas Plant, Anytown, USA	5000	No	No

I DECLARE UNDER THE PENALTIES OF PERJURY THAT THIS EMPLOYMENT VERIFICATION RECORD IS TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT, AND COMPLETE RECORD.

Signature of Master Electrician in the presence of Notary _____ Date: _____
Master Electricians License # _____

STATE OF _____)
County of _____)

On this _____ day of _____, in the year of _____, before me, a notary public in and for said county and state, personally appeared _____ known to me to be the same person who executed the within and foregoing document and he/she acknowledged to me that he/she executed the same.

SEAL

NOTARY PUBLIC _____
My commission expires _____