



EMPLOYMENT VERIFICATION
NORTH DAKOTA STATE ELECTRICAL BOARD
SFN 11845 (12-2020)

- Each employer must verify work experience separately. Please make copies as necessary.
- Verification of hours must be on this form to be acknowledged; any other forms of verification will not be accepted.
- Employment verification must accompany the Application for Electrician's License by Exam (SFN 11858) or Application for Power Limited Electrician's License (SFN 61903).

Experience Requirements:

- Master: 10,000 hours (one year and 2,000 hours if ND Journeyman).
- Class B: 3,000 hours (farmstead and residential wiring only).
- Journeyman: 8,000 hours.
- Provisional Military Spouse: Experience for at least two of the four years preceding the date of application.
- Power Limited: 6,000 hours.

Name of Applicant (First, Last)		Last 4 of Social Security Number	
Address	City	State	ZIP Code
Name of Electrical Contracting/Power Limited Business			
Address	City	State	ZIP Code
Master/Power Limited Name	Master/Power Limited License Number		
Position Held by Applicant	Date(s) of Employment Start Date(s): End Date(s):		
Total Hours of Electrical/Power Limited Work (If ND Journeyman applying for Master, provide hours as a Journeyman)		Date(s) Above Taken from Payroll Records <input type="checkbox"/> Yes <input type="checkbox"/> No - Explain	
Work Completed in the State of North Dakota <input type="checkbox"/> Yes <input type="checkbox"/> No - Attach a List of Jurisdictions and the Hours Worked in Each Jurisdiction			

I declare under the penalties of perjury that this employment verification is to the best of my knowledge and belief a true, correct, and complete record.

Signature of Contracting Master/Power Limited Electrician in Presence of Notary	Date
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State of	County
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Before me, a notary public in and for said county/state, the NAMED PERSON below, personally appeared before me to be the same person who executed the within and foregoing document and he/she acknowledges to me that he/she executed the same.

On this day:	Date
Name of Individual Signing Document	Affix Notary Stamp
Signature of Notary Public or Other Authorized Officer	
Commission Expiration Date (if not listed on stamp)	

North Dakota State Electrical Board
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