



APPLICATION FOR ELECTRICIAN'S LICENSE BY EXAM
 NORTH DAKOTA STATE ELECTRICAL BOARD (NDSEB)
 SFN 11858 (11-2020)

APPLICATION INSTRUCTIONS

- All fields must be completed, including signature and date. Allow 2 to 3 weeks for processing.
- Submit application and appropriate fee by one of the following:
 - Print, complete and mail with supporting documentation to ND State Electrical Board, PO Box 7335, Bismarck, ND 58507 with a check or money order payable to ND State Electrical Board (NDSEB); or
 - Complete, download and email as a single PDF file to electric@nd.gov. Once an email confirmation is received from our office, applicant may call 701-328-9522 to make fee payment by credit or debit card.

**Note: A separate licensing fee will be required upon passing the exam.*

APPLICANT REQUIREMENTS

- Work Experience must be completed as follows:
 - Minimum of 10,000 hours for Master (one year and 2,000 hours if ND Journeyman).
 - If self-employed, need minimum hours of prior work experience.
 - Minimum of 8,000 hours for Journeyman.
 - Minimum of 3,000 hours for Class B; farmstead or residential wiring only.
 - Provisional-Military Spouse; experience for at least two of the four years preceding the date of application.
- If majority of practical experience was obtained in North Dakota, successfully completed one of the following:
 - Two (2) years of electrical school approved by the board; or
 - Five hundred seventy-six (576) hours of training classes approved by the board; or
 - A professional electrician apprentice program recognized by the board.
- Employment Verification (SFN 11845) must accompany this application (not required for re-exam).

APPLICANT INFORMATION

License Type and Application Fee <input type="checkbox"/> Master \$50.00 <input type="checkbox"/> Class B \$40.00 <input type="checkbox"/> Journeyman \$25.00 <input type="checkbox"/> Provisional-Military Spouse \$0.00		Is this for a Re-Exam? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Submit Application and Fee Only	
Name		Social Security Number	Date of Birth
Mailing Address		City	State ZIP Code
Cell Phone Number		Email Address	
Active Member of the US Armed Forces or Reserve? <input type="checkbox"/> No <input type="checkbox"/> Yes		Spouse of a Member of the US Armed Forces or Reserve? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Graduated from High School or Received a GED? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Graduate of an Electrical Trade School? <input type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, Attach Transcript (Journeyman Applicants Only; Not Required for Re-Exam)	
Successfully Completed Apprenticeship Training Approved by NDSEB? <input type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, Attach Completion Certificate (Journeyman Applicants Only; Not Required for Re-Exam)	
Registered or Licensed with the NDSEB? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Registered or Licensed in a State Other than North Dakota? <input type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, List Other States	

Ever Been Convicted of a Felony Under the Laws of this State or Any Other Jurisdiction? <input type="checkbox"/> No <input type="checkbox"/> Yes
If Yes to Felony, Explain in Detail

WORK EXPERIENCE

If applying for Re-Exam, provide present employer only.

Present Employer	City	State
Work Experience (Commercial, Residential, Industrial, etc.)	Start Date	End Date
Hours Worked		
Previous Employer	City	State
Work Experience (Commercial, Residential, Industrial, etc.)	Start Date	End Date
Hours Worked		
Previous Employer	City	State
Work Experience (Commercial, Residential, Industrial, etc.)	Start Date	End Date
Hours Worked		
Previous Employer	City	State
Work Experience (Commercial, Residential, Industrial, etc.)	Start Date	End Date
Hours Worked		
Previous Employer	City	State
Work Experience (Commercial, Residential, Industrial, etc.)	Start Date	End Date
Hours Worked		
Previous Employer	City	State
Work Experience (Commercial, Residential, Industrial, etc.)	Start Date	End Date
Hours Worked		

Attach Additional Work Experience if Needed

ACKNOWLEDGEMENT & SIGNATURE

I authorize investigation and certify that all statements contained in this application are true and accurate. In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to North Dakota Century Code 43-50-02. The individual's social security number is used for identification and verification purposes. Penalty for the applicant not including the social security number on their application will cause the application to not be processed.

Applicant Signature	Date
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SUBMIT COMPLETED APPLICATION

- Send by mail to North Dakota State Electrical Board, PO Box 7335, Bismarck, ND 58507; or
- Send as a PDF file by email to electric@nd.gov
- For more information, call us at 701-328-9522 or visit the NDSEB website at www.ndseb.com

FOR OFFICE USE ONLY

Employer	Experience Credit	
	Hours	Jurisdiction

Education	Hours	Completion Date
TOTAL		

Re-Exam	Date	Score/Waiting Period

<input type="checkbox"/> Approved <input type="checkbox"/> Denied	For <input type="checkbox"/> Master <input type="checkbox"/> Journeyman <input type="checkbox"/> Class B <input type="checkbox"/> Provisional–Military Spouse
Approved By	Date
Exam Date	Exam Score
License Number	Date Issued