



STATE OF NEW HAMPSHIRE ELECTRICIANS' BOARD

FOR OFFICE USE ONLY

Number Assigned _____

APPLICATION FOR NEW:

APPRENTICE ELECTRICIAN - \$30 ID CARD FEE
HIGH MEDIUM VOLTAGE TRAINEE- \$30 ID CARD FEE
Check Payable to 'Treasurer State of NH' (Non-Refundable Fee)

Mail completed application to: ELECTRICIANS BOARD
NH OPLC – TECHNICAL DIVISION
121 SOUTH FRUIT STREET, SUITE 201
CONCORD, N.H. 03301
Questions? Contact:
pamela.olin@oplc.nh.gov
<http://www.oplc.nh.gov/electricians/index.htm>

Name:			Date of Birth:		
Last	First	Middle Initial	SS #:		
Mailing Address:					
Street		City	State	Zip Code	
E-Mail:			Phone:		
<u>EMPLOYMENT</u>					
Employer's Name:					
Employer's Address:					
Street		City	State	Zip Code	
Nature of Employer's Business:					
Employer's Phone #:			Date Employment Started:		
Master Electrician's signature:				Master's License #:	
Former Employer's name:					
Former Employer's Address:					

REFERENCES

Applicant will give the names and addresses of 3 references of persons unrelated to the applicant who have knowledge of the applicant's professional character per Elec 301.04.

Name:	Address:
Name:	Address:
Name:	Address:

QUESTIONS

	Yes	No
1. Have you ever been convicted of any felony criminal convictions that have not been annulled by a court pursuant to RSA 651:5 and if not annulled, please include a written explanation including the Date of the conviction, the nature of the offence, the penalty imposed by the court, including any terms of probation, and any continuing court requirements.	<input type="checkbox"/>	<input type="checkbox"/>
2. Has your electrician's license ever been suspended, revoked, or sanctioned in any jurisdiction, if so, include the name and location of the particular administrative agency, an explanation of the circumstances, date of administrative agency's action, and reason for the administrative agency's action, including whether it was a result of a settlement.	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you licensed as an electrician or a high/medium voltage electrician in another State, if so please name that state: _____	<input type="checkbox"/>	<input type="checkbox"/>

EDUCATION

High School / College /Apprentice Program	Name of School	Graduation Date	Diploma/Degree

PHOTOGRAPH

Pursuant to Elec 301.04, Attach a **color** photograph of the applicant taken not more than six (6) months prior to the date of the application.

Date Picture was taken:

I have read the contents hereof and clearly understand that the correctness and truth of my statements as recorded in this application are material, not only to the issuance of the certificate of licensure, as applied for, but also to the retention of said certificate, if issued.

Signature of Applicant	Date

Credit Card Sheets are not accepted via e-mail.

You may pay your fee with a credit card by filling out this form. Please make sure that all information is correct and up to date. Indicate what the fee is for under transaction type.

Fax: 603-271-7928

This page will be destroyed after the transaction has taken place.

Transaction Type:		Amount Due:	
Card Type: (please select one) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard (required)			
Card Number			(required)
Expiration Date:	Month:	Year:	(required)
Billing Name and Address (your billing address must match the address associated with the credit card you are using.)			
Name on Card:			
Billing Address:			
City:			
State/Province:			
Zip/Postal Code:			
Country:			
Authorization Signature :			

Rev. 2/19 Any payment for issued licenses or certifications are non-refundable.

**OPTIONAL INFORMATIONAL QUESTION
REGARDING MILITARY EXPERIENCE AND/OR RELATIONSHIP
TO MILITARY PERSONNEL TRANSFERRED TO NEW HAMPSHIRE**

Dear Applicant,

Pursuant to New Hampshire RSA 332-G:7, each board supported by the New Hampshire Office of Professional Licensure and Certification (OPLC) shall:

1. "upon presentation of satisfactory evidence with an application for licensure, certification, or registration, accept education, training, or service completed by an individual as a member of the armed forces, as defined in RSA 21:50, II, toward the qualifications required to receive the license, certificate, or registration in question."

RSA 21:50, II - "Armed forces" means the United States Army, Army Reserve, Navy, Naval Reserve, Marine Corps, Marine Corps Reserve, Air Force, Air Force Reserve, Coast Guard, Coast Guard Reserve, Army National Guard, and the Air National Guard. "Armed forces" also includes other components, but is limited to those components and active duty periods described in 38 C.F.R. 3.7.

OR

2. "Notwithstanding any general or special law to the contrary, each of the boards or commissions under this title authorized to conduct licensure, certification, or registration, and examinations therefor, shall upon the presentation of satisfactory evidence by an applicant before the board or commission, facilitate the issuance of a license or certification for a person: (i) who is certified or licensed in a state other than New Hampshire; (ii) whose spouse is a member of the armed forces in the United States; (iii) whose spouse is the subject of a military transfer to New Hampshire; and (iv) who left employment to accompany a spouse to New Hampshire. The procedure shall include, but not be limited to, facilitating the issuance of a license, certificate, or registration if, in the opinion of the board or commission, the requirements for licensure, certification, or registration of such other state are substantially equivalent to the requirements for licensure, certification, or registration in New Hampshire."

Please place a check mark in all that apply below:

- I **am** eligible for consideration as defined in paragraph #1 above.
- I **am not** eligible for consideration as defined in paragraph #1 above.
- I **am** eligible for consideration as defined in paragraph #2 above.
- I **am not** eligible for consideration as defined in paragraph #2 above