Minnesota Department of Labor and Industry
Construction Codes and Licensing Division
Licensing and Certification Services / Electrical
443 Lafayette Road North
St. Paul, MN 55155

E-mail: DLI.Exam@state.mn.us
Website: www.dli.mn.gov
Phone: (651) 284-5034

DEPARTMENT OF LABOR AND INDUSTRY

Personal Electrical License Examination Application

Application Fee = $50.00

PAID APPLICATION FEE IS NOT REFUNDABLE
CASH IS NOT ACCEPTED BY MAIL OR WALK-IN

MAKE CHECK OR MONEY ORDER PAYABLE TO:
MINNESOTA DEPARTMENT OF LABOR & INDUSTRY

SPACE IN BOX FOR OFFICE USE ONLY

Account #	632432	STK	B42ELELIC
Check Number		Amount Paid	
☐ PCK ☐ CCK ☐ MO		DLI Deposit Date	

NOTICE: Pursuant to Minnesota Statute § 604.113, checks returned for nonpayment will be charged a $30 service charge and may subject the issuer to additional civil penalties.

SELECT THE LICENSE YOU ARE APPLYING FOR:

- ☐ Class A Master Electrician
- ☐ Class A Journeyworker Electrician
- ☐ Class B Installer
- ☐ Lineman
- ☐ Maintenance Electrician
- ☐ Power Limited Technician
- ☐ Satellite System Installer

Is this a license exam RETEST?
☐ **YES** ☐ **NO**

If **YES**, submit application form and fee only. (No work verification is required)

PRINT IN INK OR TYPE
MAKE A COPY OF THIS APPLICATION FOR YOUR RECORD

APPLICATION NUMBER:

ALL APPLICANTS MUST COMPLETE THE ATTACHED ELECTRICAL WORK EXPERIENCE VERIFICATION FORM
*(The **only** exceptions are: a Satellite System Installer or an applicant who is retesting)*

LICENSED / REGISTERED
(please provide a copy of your license / registration)

- ☐ MN Registered Unlicensed Individual
- ☐ Licensed in a state other than Minnesota

EDUCATION (original transcript must be attached)

- ☐ Bachelor's degree in electrical engineering
  (Master A Electrician & Power Limited Technician licenses only)
- ☐ State approved electrical education program
- ☐ Satellite System Installer Certificate issued by SBCA or other approved program

The information you as an individual provide in this application will be used by Department of Labor & Industry staff members to determine if you meet the Department's registration requirements. Minnesota Statute § 270C.72, Subd. 4, requires you to provide your social security number on this application. The other information is being requested for purposes of processing your application. With the exception of your Social Security number, you are not legally required to supply the requested data on this application; however, failure to provide the requested information may delay the processing of your application or result in the denial of the same. Except for your name and designated address, the information you provide on this application is private data while the application is pending. Disclosure of this information to others may occur as authorized or required by law, including but not limited to the Attorney General's Office, the Department of Revenue, the Department of Human Services, upon court order, and/or for the purpose of verification and investigation. Once you are registered, the information you provide, other than your Social Security Number and non-designated address, becomes public data and may be released to anyone upon request.

SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YY)	AREA CODE & PHONE NUMBER	E-MAIL ADDRESS

LEGAL LAST NAME	SUFFIX (JR, SR, II,III)	LEGAL FIRST NAME	LEGAL MIDDLE NAME

RESIDENTIAL ADDRESS			PUBLIC MAILING ADDRESS (if different from residential address)		
CITY NAME	STATE	ZIP CODE	CITY NAME	STATE	ZIP CODE

Is the residential address above a non-designated (private) address? ☐ **Yes** ☐ **No** If **Yes,** then you must provide a designated (Public) mailing address.

APPLICANT SIGNATURE	DATE SIGNED (MM/DD/YY)

This material can be made available in different forms, such as large print, braille or on audio.

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DEPARTMENT OF LABOR AND INDUSTRY

Electrical

Work Experience Verification Form

PRINT clearly IN INK OR TYPE
MAKE A COPY OF THIS FORM FOR YOUR RECORDS

Applicant's Legal Name:	License / Registration Number: (if applicable)	SSN: (Last 4 digits Only)

License Type:

☐ Class A Master Electrician ☐ Maintenance ☐ Installer B
☐ Class A Journeyworker Electrician ☐ Lineman

To apply for licensure and examination, the applicant must provide verification of their employment and qualifying work. Verification information required includes: name, address, and phone number of the employer, applicant's dates of employment with the employer, class of work performed; and hours worked. The information provided on this form is public data and shall be used to qualify the individual identified above for licensure and examination. **Individuals with multiple employers during the reporting period must make copies of the form and have each employer complete a separate verification.**

Employer Name			License / Registration Number
Employer Address			Telephone
City	State	Zip	Email Address
Name of Responsible Person (Master Electrician)		License Number	Title

Qualifying work experience is measured on a monthly basis. In order to accurately verify qualifying experience, the actual hours worked in each Class of Work must be reported. Credit of not more than 160 hours per month or 2000 hours per year is allowed as qualifying experience. Hours reported on this form must be supported by records maintained by the employer and demonstrate experience qualifying with M.S. §326B.33 and M.S. Rule 3800.3520. Knowingly providing inaccurate or fraudulent information may subject the violator to disciplinary action and a monetary penalty of up to $10,000 per violation. To obtain additional information regarding work experience please visit our website at http://www.dli.mn.gov/workers/electrician-or-electrical-installer/licensing-personal-electrical-license

Complete a SEPARATE work experience form for each year of employment.

Date of Employment:

Start Date:	End Date:

Are the hours reported on this form taken from payroll records?
☐ YES ☐ OTHER (specify)

CLASS OF WORK	For Office Use Only	Hours Worked
WIRING FOR AND INSTALLING ELECTRICAL WIRING, APPARATUS AND EQUIPMENT	30	
MAINTAINING AND REPAIRING ELECTRICAL WIRING, APPARATUS AND EQUIPMENT	31	
WIRING AND MAINTAINING TECHNOLOGY CIRCUITS OR SYSTEMS	33	
INSTALLING ELEVATORS	34	
LINE WORK	35	
WIRING AND MAINTAINING PROCESS CONTROL CIRCUITS OR SYSTEMS	36	
PLANNING FOR THE INSTALLATION OF WIRING, APPARATUS AND EQUIPMENT FOR LIGHT, HEAT AND POWER	MASTER	
LAYING OUT FOR THE INSTALLATION OF WIRING, APPARATUS, AND EQUIPMENT FOR LIGHT, HEAT AND POWER	MASTER	
SUPERVISING THE INSTALLATION OF WIRING APPARATUS AND EQUIPMENT FOR LIGHT, HEAT AND POWER	MASTER	
TOTAL OF ALL QUALIFYING HOURS WORKED (MAX 2,000 HOURS PER YEAR)		

Form must be signed by the designated Responsible Person and Applicant. I certify that I personally know or that the employer's employment records verify that this individual, during the referenced employment period, engaged in the identified classes of work for the number of hours shown. The applicant's signature below acknowledges agreement with the information provided on this form.

RESPONSIBLE PERSON'S SIGNATURE	DATE SIGNED	APPLICANT'S SIGNATURE	DATE SIGNED

INSTRUCTIONS
Employer must complete the Work Experience Verification Form.
READ CAREFULLY BEFORE COMPLETING THIS FORM

REGISTERED UNLICENSED INDIVIDUAL WORK EXPERIENCE

Registered unlicensed individuals, as part of renewing their registration, must provide verification of their employment by a licensed contractor or registered employer during the registration period. This form reports the verified hours and is adapted for use by unlicensed individuals registered to perform electrical work. The reason for verifying work hours each year along with renewing a registration is so the registered individual does not have to verify these hours when applying for a license examination. Verifying hours annually when renewing a registration enables the department to gradually qualify an individual for examination, which makes for quicker approvals.

- Address information on the form is the unlicensed individual's mailing address. Updates to the individual's personal or mailing address may be noted on the registration renewal form. Address changes may also be made by emailing dli.license@state.mn.us
- Provide exact dates of employment during the 12-month registration period (expiration date of unlicensed registration card). Include the month, day, and year.
- Indicate whether the hours reported on the form are taken from payroll records; and if not, specify the other forms of documentation used to verify the individual's work experience.
- For each class of work identified, enter the actual hours the individual performed that class of work during the registration period. (Note: Blanks will be assigned 0 hours.)
- Enter the total number of electrical work hours verified, which may not exceed 2,000 hours.

EMPLOYER INFORMATION (MANDATORY INFORMATION)

- Enter the employer's business name, address, license or registration number, contact's phone number, and email address. (NOTE: License number is mandatory, if business holds contractor license number.)
- Enter the employer's designated responsible individual's name and license number. The individual's license number must match what the department has on record as the designated responsible individual and license number.

OUT OF STATE WORK EXPERIENCE

- Provide exact dates of employment during the 12-month Include the month, day, and year.
- Indicate whether the hours reported on the form are taken from payroll records; and if not, specify the other forms of documentation used to verify the individual's work experience, must be verified by an individual/business that is properly licensed to perform that work in that state..
- For each class of work identified, enter the actual hours the individual performed that class of work during the registration period. (Note: Blanks will be assigned 0 hours, total number of electrical work hours verified, may not exceed 2,000 hours.)
- If self-employed provide two written statements from either authorized electrical or building inspector or other electrical contractors conducting business in the same vicinity per Minn. Rule 3800.3520.

Certification Signature and Date

- The employer's designated responsible individual must certify, with a signature, that the registered unlicensed individual performed the identified classes of work for the number of hours entered on the form during the 12-month registration period.
- The registered unlicensed individual's signature on the form acknowledges agreement with the information verified by the employer.

QUALIFYING FOR A LICENSE EXAMINATION

Work verification is for the following license classifications, which require a minimum number of months/hours qualifying work experience to become licensed. Detailed information on qualifying for a license exam is available at http://www.dli.mn.gov/workers/electrician-or-electrical-installer/licensing-personal-electrical-license

License Class	Law (Rule)	Requirement	Minimum Requirements
Master Class A Electrician	326B.33 (3800.3520)	60 months (10,000 hrs)	12 months experience which includes:2 months planning; 2 months laying out; 2 months supervising
Journeyworker Class A Electrician	326B.33 (3800.3520)	48 months (8,000 hrs)	2 yrs electrical installation
Maintenance Electrician	326B.33 (3800.3520)	48 months (8,000 hrs)	2 yrs electrical maintenance
Installer B	326B.33 (3800.3520)	12 months (2,000 hrs)	No minimum requirements
Lineman	326B.33 (3800.3520)	48 months (8,000 hrs)	2 yrs line work

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DEPARTMENT OF LABOR AND INDUSTRY

Power Limited Technician

Work Experience Verification Form

PRINT clearly IN INK OR TYPE
MAKE A COPY OF THIS FORM FOR YOUR RECORDS

Applicant's Legal Name:	License / Registration Number: (if applicable)	SSN: (Last 4 digits Only)

To apply for licensure and examination, the applicant must provide verification of their employment and qualifying work. Verification information required includes: name, address, and phone number of the employer, applicant's dates of employment with the employer, class of work performed; and hours worked. The information provided on this form is public data and shall be used to qualify the individual identified above for licensure and examination. **Individuals with multiple employers during the reporting period must make copies of the form and have each employer complete a separate verification.**

Employer Name			License / Registration Number
Employer Address			Telephone
City	State	Zip	Email Address
Name of Responsible Person (Power Limited Tech)		License Number	Title

Qualifying work experience is measured on a monthly basis. In order to accurately verify qualifying experience, the actual hours worked in each Class of Work must be reported. Credit of not more than 160 hours per month or 2000 hours per year is allowed as qualifying experience. Hours reported on this form must be supported by records maintained by the employer and demonstrate experience qualifying with M.S. §326B.33 and M.S. Rule 3800.3520. Knowingly providing inaccurate or fraudulent information may subject the violator to disciplinary action and a monetary penalty of up to $10,000 per violation. To obtain additional information regarding work experience please visit our website at http://www.dli.mn.gov/workers/electrician-or-electrical-installer/licensing-personal-electrical-license

Complete a SEPARATE work experience form for each year of employment.

Date of Employment:

Start Date:	End Date:

Are the hours reported on this form taken from payroll records?
☐ YES ☐ OTHER (specify)

CLASS OF WORK	For Office Use Only	Hours Worked
WIRING FOR AND INSTALLING TECHNOLOGY CIRCUIT OR SYSTEM WIRING APPARATUS AND EQUIPMENT	32	
MAINTAINING AND REPAIRING TECHNOLOGY CIRCUIT OR SYSTEM WIRING, APPARATUS AND EQUIPMENT	33	
WIRING AND MAINTAINING PROCESS CONTROL CIRCUITS OR SYSTEMS	36	
PLANNING FOR THE INSTALLATION OF WIRING APPARATUS AND EQUIPMENT FOR TECHNOLOGY CIRCUITS OR SYSTEMS	38	
LAYING OUT FOR THE INSTALLATION OF WIRING, APPARATUS AND EQUIPMENT FOR TECHNOLOGY CIRCUITS OR SYSTEMS	39	
SUPERVISING THE INSTALLATION OF WIRING, APPARATUS AND EQUIPMENT FOR TECHNOLOGY CIRCUITS OR SYSTEMS	40	
TOTAL OF ALL QUALIFYING HOURS WORKED (MAX 2,000 HOURS PER YEAR)		
TOTAL OF ALL QUALIFYING HOURS WORKED – 36 MONTHS EXPERIENCE REQUIRED TO TAKE EXAM = 6,000 HOURS		

Form must be signed by the designated Responsible Person and Applicant. I certify that I personally know or that the employer's employment records verify that this individual, during the referenced employment period, engaged in the identified classes of work for the number of hours shown. The applicant's signature below acknowledges agreement with the information provided on this form.

RESPONSIBLE PERSON'S SIGNATURE	DATE SIGNED	APPLICANT'S SIGNATURE	DATE SIGNED

INSTRUCTIONS
Employer must complete the Work Experience Verification Form.
READ CAREFULLY BEFORE COMPLETING THIS FORM

REGISTERED UNLICENSED INDIVIDUAL WORK EXPERIENCE

Registered unlicensed individuals, as part of renewing their registration, must provide verification of their employment by a licensed contractor or registered employer during the registration period. This form reports the verified hours and is adapted for use by unlicensed individuals registered to perform electrical work. The reason for verifying work hours each year along with renewing a registration is so the registered individual does not have to verify these hours when applying for a license examination. Verifying hours annually when renewing a registration enables the department to gradually qualify an individual for examination, which makes for quicker approvals.

- Address information on the form is the unlicensed individual's mailing address. Updates to the individual's personal or mailing address may be noted on the registration renewal form. Address changes may also be made by emailing dli.license@state.mn.us
- Provide exact dates of employment during the 12-month registration period (expiration date of unlicensed registration card). Include the month, day, and year.
- Indicate whether the hours reported on the form are taken from payroll records; and if not, specify the other forms of documentation used to verify the individual's work experience.
- For each class of work identified, enter the actual hours the individual performed that class of work during the registration period. (Note: Blanks will be assigned 0 hours.)
- Enter the total number of electrical work hours verified, which may not exceed 2,000 hours.

EMPLOYER INFORMATION (MANDATORY INFORMATION)

- Enter the employer's business name, address, license or registration number, contact's phone number, and email address. (NOTE: License number is mandatory, if business holds contractor license number.)
- Enter the employer's designated responsible individual's name and license number. The individual's license number must match what the department has on record as the designated responsible individual and license number.

OUT OF STATE WORK EXPERIENCE

- Provide exact dates of employment during the 12-month Include the month, day, and year.
- Indicate whether the hours reported on the form are taken from payroll records; and if not, specify the other forms of documentation used to verify the individual's work experience, must be verified by an individual/business that is properly licensed to perform that work in that state..
- For each class of work identified, enter the actual hours the individual performed that class of work during the registration period. (Note: Blanks will be assigned 0 hours, total number of electrical work hours verified, may not exceed 2,000 hours.)
- If self-employed provide two written statements from either authorized electrical or building inspector or other electrical contractors conducting business in the same vicinity per Minn. Rule 3800.3520.

Certification Signature and Date

- The employer's designated responsible individual must certify, with a signature, that the registered unlicensed individual performed the identified classes of work for the number of hours entered on the form during the 12-month registration period.
- The registered unlicensed individual's signature on the form acknowledges agreement with the information verified by the employer.

QUALIFYING FOR A LICENSE EXAMINATION

Work verification is for the following license classifications, which require a minimum number of months/hours qualifying work experience to become licensed. Detailed information on qualifying for a license exam is available at http://www.dli.mn.gov/workers/electrician-or-electrical-installer/licensing-personal-electrical-license

License Class	Law (Rule)	Requirement	Minimum Requirements
Power Limited Technician	326B.33 (3800.3520)	36 Months 6,000	2,000 hours – wiring for and installing technology circuit or system wiring, apparatus, and equipment:

*A maximum of one year (2,000 hours) of experience credit will be allowed for the successful completion of a two-year post- high school technical course approved by the department.