ONE STOP PERMITTING

CITY OF BIRMINGHAM DEPARTMENT OF PLANNING, ENGINEERING & PERMITS 710 - 20th Street, North ROOM 207, CITY HALL BIRMINGHAM, ALABAMA 35203

Randall L. Woodfin, Mayor Katrina R. Thomas, Director

APPLICATION / REGIS ELE	APPRENTICE	DateCase NoMaster NoProject No					
	Please print legi	bly and fill in all that a	pply				
TO: BOARD OF ELECTRICAL EXAM	INERS		Date:				
I,Last		Final				NA 1	-
		First				M.I.	
Date of Birth: / Address:		Social Security No: _ City/State/Zip:					
Telephone: ()		_ Fax: <u>()</u>					
Email Address:		Signature					
hereby make application for examination of Birmingham.	on for registration as a	n Apprentice Electrician	in accordance w	ith the Ele	ectrical Cod	de of the	City
	EDUCA	ATION AND TRAINING					
HIGH SCHOOL GRADUATE? TRADE SCHOOL? Yes No	Yes	If no, circle highe				11	12
TRADE SCHOOL: 1165 NO	Address						
Course Completed?	If not completed, list	years attended:					
APPRENTICE SCHOOL TRAINING?	Name of School:						
□Yes □No	City/State/Zip						
Course Completed? Yes No	o If not completed, list	years attended:					
APPRENTICE TRAINING - Begin wit	h present employer a	and work back.	From	/	To r	oresent	
Company	St	reet Address		Mo.	Yr.		
Company		root Addroop	From _	/	To Yr.	/	\/-
Company	51	reet Address					
Company	St	reet Address	From _	/ Mo.	To Yr.	/ Mo.	Yr.
			From	/	To	/	
Company	St	reet Address		Mo.	To Yr.	Mo.	Yr.
			From _	1	To	/	
Company	St	reet Address		Mo.	Yr.	Mo.	Yr.
IF ADDITIONAL SPACE IS NEEDEI I certify that the above statements are	D, USE BACK OF TH	HIS FORM.	a and understa	nd that a	ny incorre	et inform	nation
or false statement made herein will vo					ny moonet	.t 11110111	iation
I fully understand that as an Apprenti under the direct supervision of the hol is in progress as required by the Elect	der of a Master or Jou	urneyman Certificate of					
Signature							
The Board reserves the right to corapplication. You will be notified by					nation give	en in th	is
	F	OR STAFF USE					
DATE REGISTRATION CERTIFICATE	ISSUED	APPLIC	ANT REGISTER	RED:]In Person	□Ву	[,] Mail
CERTIFICATE NUMBER:		PEGIST	ERED BY:				