



APPLICATION FOR ELECTRICIAN'S LICENSE BY RECIPROCITY
 NORTH DAKOTA STATE ELECTRICAL BOARD
 SFN 61913 (12-2020)

- Complete all items, sign and date below. Mail to PO Box 7335, Bismarck, ND 58507 or email to electric@nd.gov.
- Appropriate application fee (check or money order) made payable to ND State Electrical Board (NDSEB) or credit card by phone (701-328-9522) must accompany this application.
- Reciprocity requirements:
 - Passed written examination from the state you are reciprocating from; and
 - Possess a valid license that is current, active and in good standing; and
 - Held license continuously during the (1) year prior to requesting reciprocity; and
 - List experience under the supervision of a contracting master where electrical construction work is done with similar licensing and inspection rules to the state of North Dakota;
 - If your apprenticeship did not include related training and the majority of practical experience was obtained in North Dakota you are not eligible for a reciprocal license or examination for licensure.
- Work experience must be completed as follows:
 - Minimum of 10,000 hours for Master.
 - Minimum of 8,000 hours for Journeyman.
 - If self-employed need minimum hours of prior work experience.

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| License Type and Application Fee <input type="checkbox"/> Master - \$50.00 <input type="checkbox"/> Journeyman - \$25.00 <i>*Note: A separate licensing fee will be required upon application approval. Journeyman applicants may submit licensing fee of \$25.00 on a separate payment; check, money order or credit card</i> |
| Reciprocating State Master & Journeyman Licenses <input type="checkbox"/> Iowa <input type="checkbox"/> Minnesota <input type="checkbox"/> South Dakota Journeyman License Only <input type="checkbox"/> Alaska <input type="checkbox"/> Arkansas <input type="checkbox"/> Colorado <input type="checkbox"/> Idaho <input type="checkbox"/> Maine <input type="checkbox"/> Montana <input type="checkbox"/> Nebraska <input type="checkbox"/> New Hampshire <input type="checkbox"/> Utah <input type="checkbox"/> Wyoming |

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|--|---|---------------|
| Name (First, Last) | Social Security Number | Date of Birth |
| Mailing Address | City | State |
| Cell Phone Number | Email Address | |
| Reciprocating State License Number | Reciprocating State Initial License Issue Date | |
| Graduated from High School or Received a GED <input type="checkbox"/> No <input type="checkbox"/> Yes | Graduate of an Electrical Trade School or Successfully Completed Apprenticeship Training <input type="checkbox"/> No <input type="checkbox"/> Yes - Where? | |
| Ever Been Convicted of a Felony Under the Laws of this State or Any Other Jurisdiction? <input type="checkbox"/> No <input type="checkbox"/> Yes - Explain fully on a separate sheet of paper | | |

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|---|------------------|-------------------|
| Present Employer | City | State |
| Work Experience (Commercial, Residential, Industrial, etc.) | Employment Dates | Est. Hours Worked |
| Previous Employer | City | State |
| Work Experience (Commercial, Residential, Industrial, etc.) | Employment Dates | Est. Hours Worked |

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Attach Additional Work Experience If Needed

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.

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|---------------------|------|
| Applicant Signature | Date |
|---------------------|------|

Submit completed application to:

North Dakota State Electrical Board
PO Box 7335
Bismarck, ND 58507

Phone: 701-328-9522
Email address: electric@nd.gov
Website: www.ndseb.com

FOR OFFICE USE ONLY

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|-----------------------------|---------------------|
| Reciprocating from State of | Date License Issued |
| | |

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|---|--|
| <input type="checkbox"/> Approved <input type="checkbox"/> Denied | For <input type="checkbox"/> Master <input type="checkbox"/> Journeyman |
| Approved By | Date |
| License Number | Date Issued |