



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

APPLICATION INSTRUCTIONS

All items must be completed, including signature and date. Allow 2 to 3 weeks for processing. For submittal instructions, see the "Submit Completed Application" section on Page 3 of 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 one (1) year prior to requesting reciprocity; and
- List work 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.
 - Master - Minimum of 10,000 hours. If self-employed, need minimum hours of prior work experience.
 - Journeyman - Minimum of 8,000 hours.
- If your apprenticeship did not include related training and the majority of practical experience was obtained in North Dakota with a North Dakota based contractor, you are not eligible for a reciprocal license or examination for licensure.
- If applying for reciprocity from a state that does not require continuing education, provide proof of completion of 8 hours of continuing education.

APPLICANT INFORMATION

Name	Social Security Number	Date of Birth	
Mailing Address	City	State	ZIP Code
Cell Phone Number	Email Address		
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		Name of School or Provider	
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:			

LICENSE TYPE AND APPLICATION FEE

Select which license type is being applied for:

License Type and Application Fee: <input type="checkbox"/> Master - \$50.00 <input type="checkbox"/> Journeyman - \$25.00

***A separate license fee will be required upon application approval.**

If Applying for a Master License, Which State Will You Be Reciprocating From? <input type="checkbox"/> Iowa <input type="checkbox"/> Minnesota <input type="checkbox"/> South Dakota	
If Applying for a Journeyman License, Which State Will You Be Reciprocating From? <input type="checkbox"/> Alaska <input type="checkbox"/> Arkansas <input type="checkbox"/> Colorado <input type="checkbox"/> Idaho <input type="checkbox"/> Iowa <input type="checkbox"/> Maine <input type="checkbox"/> Minnesota <input type="checkbox"/> Montana <input type="checkbox"/> Nebraska <input type="checkbox"/> New Hampshire <input type="checkbox"/> South Dakota <input type="checkbox"/> Utah <input type="checkbox"/> Wyoming	
Reciprocating State License Number	Reciprocating State Initial License Issue Date

***As listed in the Reciprocity Requirements section above, you must have held this license continuously during the one (1) year prior to requesting reciprocity.**

WORK EXPERIENCE

Provide the Electrical Contractor/Business for Employer, do not list IBEW/Union or Staffing Agency.

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

Attach additional work experience, if needed

ACKNOWLEDGEMENT AND 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

- Print, complete and mail with the appropriate application fee 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](mailto:electric@nd.gov). Once an email confirmation is received from our office, applicant may call 701-328-9522 to make the appropriate application fee payment by credit or debit card.
- For more information, call us at 701-328-9522 or [visit the NDSEB website at www.ndseb.com](http://www.ndseb.com)

FOR OFFICE USE ONLY

Reciprocating from State of	Date License Issued
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	For <input type="checkbox"/> Master <input type="checkbox"/> Journeyman
Approved By	Date
License Number	Date Issued