



CARBONDALE
All Ways Open

City of Carbondale
Building & Neighborhood Services
200 S. Illinois Avenue
Carbondale, Illinois 62901
Phone (618) 457-3237
Fax (618) 457-3289
Explorecarbondale.com

APPLICATION FOR ELECTRICIAN'S LICENSE

Applicant's Full Name		Date	
Social Security Number	Address		
Home/Cell Phone	Work Phone		
Over the Age of 18?	Yes	No	
The Electrical Commission may conduct a background check of all applications for licensing. Persons may be asked to supply information in addition to that requested in this application before the applicant is approved to take the examination.			
If you have lived at your present address for less than 10 years, please provide us with your residences for the past 10 years.			
<i>Address</i>		<i>City</i>	<i>State</i>
Were you ever refused a fidelity bond?		Yes	No
Have you ever refused a fidelity bond?		Yes	No
Have you ever been employed by State or Federal employer for security reasons?		Yes	No
If so, state circumstances			
Have you ever been discharged or asked not to complete an electrical project		Yes	No
If yes, give details			
Have you ever had a license with this City?	Yes	No	If so, date
Have you previously applied for an electrical license with this City?	Yes	No	
Do you have, or have you ever had, relatives licensed by this City?	Yes	No	
Name	Relationship	Name	Relationship

What type of electrical equipment have you operated? (specify)			
Do you possess any special licenses of a skill, trade or craft?		Yes	No
If yes, specify			
Have you participated in any electrical apprenticeship programs?		Yes	No
If yes, specify			
Do you possess a valid driver's license?		Yes	No
Are you a journeyman electrician?		Yes	No
If yes, when and where are you certified?			
Provide the electric utility companies whose service area you have worked in, including the utility representatives name, address and telephone numbers, who are familiar with your electrical installations.			
<i>Electric Utility</i>	<i>Representative's Name</i>	<i>Address</i>	<i>Phone</i>
Provide the City/Municipality where you have worked, including the name, addresses, and telephone number of the City, County or State Electrical Inspector who are familiar with your electrical installations.			
<i>City/Municipality</i>	<i>Inspector's Name</i>	<i>Address</i>	<i>Phone</i>
Have you ever had an electrical license revoked?		Yes	No
If yes, explain			
What are two primary reasons why you are applying for an electrician's license from the City of Carbondale?			

EDUCATION		
<i>Type of School</i>	<i>Name & Location</i>	<i>Years Completed</i>
Elementary		
High School		
College/University		
College/University		
Graduate School		
Business School		
Correspondence		
<i>Major Course</i>	<i>Degree</i>	<i>Last Year Attended</i>

UNITED STATES MILITARY EXPERIENCE

Branch	Date Entered	Date Discharged	Last Rank
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Principle Duties and Schools

BEGIN WITH LAST EMPLOYER, LIST ELECTRICAL EXPERIENCE

From	To	Employer Name and Address	Phone
Position		Address and City where worked, if different	
From	To	Employer Name and Address	Phone
Position		Address and City where worked, if different	
From	To	Employer Name and Address	Phone
Position		Address and City where worked, if different	
From	To	Employer Name and Address	Phone
Position		Address and City where worked, if different	