

# APPLICATION FOR EXAMINATION INSTRUCTIONS

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## **IMPORTANT – READ CAREFULLY**

To be considered for a qualifying examination administered by the Board, the applicant must be at least eighteen (18) years as certified by date of birth shown on the application and must submit a completed application form, together with the following required information:

- Statements from present and/or past employer(s) satisfactorily verifying that the applicant has acquired the minimum years of experience for the examination classification desired (see *Employer Statement Forms*, in back of handbook).
- Statement from **TWO** (2) responsible persons attesting to applicant's good character (see *Character Statement Forms*, in back of handbook).
- **UNLIMITED CLASSIFICATION ONLY:** Statements from **TWO** (2) responsible persons attesting to applicant's ability to satisfactorily supervise and direct all electrical wiring or electrical installation work done by an electrical contracting business in the **UNLIMITED CLASSIFICATION** (see *Supervise and Direct Statement Forms*, in back of handbook).
- Appropriate application-examination fee in a check or money order payable to the “**State Board of Examiners of Electrical Contractors**” or payment by credit card.

## **NOTICE OF PROCESSING FEE FOR SUBMITTAL OF BAD CHECK**

Pursuant to Rule .0107 of Title 21, Chapter 18B, of the North Carolina Administrative Code, any person, partnership, firm, or corporation submitting a check to the Board that is subsequently returned because of **insufficient funds** or **no account at a bank** will be charged a **processing fee** of **\$25.00** for such a check; and, until the payer has made the check good and paid the \$25.00 processing fee, the payer will not be eligible to take an examination, review an examination, obtain a license or have a license, renewed. Payment for making good such bad check and for the \$25.00 processing fee must be in the form of a cashier's check or money order payable to the “**State Board of Examiners of Electrical Contractors**”.

*The application can be found on the back of this page.*



# APPLICATION FOR EXAMINATION

MAIL TO: STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS  
P.O. BOX 18727, RALEIGH, NC 27619-8727 TELEPHONE: (919) 715-7605

**\$90.00 EXAMINATION FEE FOR ALL CLASSIFICATIONS**

Before completing, **PLEASE READ SECTION .0200-EXAMINATIONS** found on pages 35-40 in this handbook.

**ALL EXAMINATIONS ARE COMPUTER-BASED.**

**SCHEDULING**  
3-5 BUSINESS DAYS

**SCORING**  
SAME DAY

1. CLASSIFICATION OF EXAMINATION (CHECK CLASSIFICATION):

- LIMITED     
  INTERMEDIATE     
  UNLIMITED     
  SP-SFD     
  SP-FA/LV  
 SP-PH     
  SP-EL     
  SP-WP     
  SP-ES     
  SP-SP

2. NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
FIRST MIDDLE LAST

ADDRESS \_\_\_\_\_ ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_  
STREET, P.O. BOX OR RURAL ROUTE CITY STATE

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
AREA CODE

3. HAVE YOU EVER BEEN APPROVED TO TAKE AN EXAMINATION CONDUCTED BY THIS BOARD FOR AN ELECTRICAL CONTRACTING LICENSE? \_\_\_\_\_ WHICH CLASSIFICATION? \_\_\_\_\_

4. NAME OF PRESENT EMPLOYER \_\_\_\_\_

COMPLETE MAILING ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ DATE EMPLOYED \_\_\_\_\_  
AREA CODE

IN WHAT CAPACITY ARE YOU PRESENTLY EMPLOYED? \_\_\_\_\_

5. HAVE YOU BEEN CONVICTED OF A MISDEMEANOR (EXCLUDING MINOR TRAFFIC VIOLATIONS) DURING THE PAST 3 YEARS?  YES  NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY?  YES  NO

IF YES TO EITHER, EXPLAIN ON REVERSE SIDE OF THIS FORM AND PROVIDE A COPY OF THE COURT JUDGMENT. IF A COPY OF THE COURT JUDGMENT WAS PREVIOUSLY SUBMITTED, INITIAL HERE AND DO NOT RE-SUBMIT.

6. THE APPLICANT AUTHORIZES THE BOARD TO RESEARCH AND VERIFY THE INFORMATION SUBMITTED CONCERNING THIS APPLICATION.

DATE \_\_\_\_\_ SIGNATURE OF APPLICANT \_\_\_\_\_

7. **METHOD OF PAYMENT**  CHECK (*made payable to NCBEEC*)  MONEY ORDER  VISA  MASTERCARD

CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

NAME ON CARD \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**(FOR BOARD USE ONLY)** APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_ FEE \$90.00 BATCH/RECEIPT# \_\_\_\_\_

EXPERIENCE \_\_\_\_\_ S&D FORMS \_\_\_\_\_ CHARACTER \_\_\_\_\_

DATA ENTRY \_\_\_\_\_ BY \_\_\_\_\_ LIC#/NAME \_\_\_\_\_ GRADE \_\_\_\_\_

4NCRECORDS.COM \_\_\_\_\_