



# APPLICATION FOR EXAMINATION

**SUBMIT DOCUMENTS TO:**

Mail: NCBEEC, 505 N. Greenfield Pkwy, Suite 100, Garner, NC 27529

Email: Office@ncbeec.org

Fax: (800) 691-8399

**EXAMINATION FEE: \$125.00** (ALL CLASSIFICATIONS; INCLUDES APPLICATION AND EXAMINATION. APPLICATION FEE IS NON-REFUNDABLE.)

1. CLASSIFICATION OF EXAMINATION (CHECK ONE 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 OR P.O. BOX) (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. PRESENT EMPLOYER COMPANY NAME \_\_\_\_\_  
(LIST UNEMPLOYED OR N/A IF NO EMPLOYER)

EMPLOYER MAILING ADDRESS \_\_\_\_\_  
(STREET OR P.O. BOX) (CITY) (STATE) (ZIP CODE)

EMPLOYER PHONE \_\_\_\_\_ CURRENT POSITION \_\_\_\_\_ HIRE DATE \_\_\_\_\_  
(AREA CODE)

*UNDER STATE LAW, AN APPLICANT IS NOT REQUIRED TO INCLUDE A REFERENCE TO OR INFORMATION CONCERNING ANY ARREST, CHARGE OR CONVICTION THAT HAVE BEEN EXPUNGED*

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

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

6. METHOD OF PAYMENT  CHECK/MONEY ORDER (PAYABLE TO NCBEEC)  CREDIT CARD

CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_

CARD NAME \_\_\_\_\_ BILLING ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

**BY SIGNING THE APPLICANT AUTHORIZES THE BOARD TO RESEARCH AND VERIFY THE INFORMATION SUBMITTED CONCERNING THIS APPLICATION.**

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

(FOR BOARD USE ONLY)

APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_ FEE \_\_\_\_\_ BATCH \_\_\_\_\_

EXPERIENCE \_\_\_\_\_ S&D \_\_\_\_\_ CHARACTER \_\_\_\_\_ BACKGROUND \_\_\_\_\_