FORM A

Experience as a Journeyman, Contractor or Inspector

Individuals documenting experience as an inspector must complete Part 1 and Part 3
Individuals documenting experience as a journeyman must complete Part 1 and Part 3
Individuals documenting experience as a contractor should complete Part 2 and Part 3

PART 1

Date of completion of apprenticeship, or its equivalent _____
(Please submit documentation of said completion)

PART 2

Type of contractor license _____ **State/Municipality** _____
License Number _____ **Date Issued** _____
Type of contractor license _____ **State/Municipality** _____
License Number _____ **Date Issued** _____

PART 3 CLAIM OF EXPERIENCE

Position: _____
Employer: _____
Address: _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____

Dates of Employment
FROM: _____ **TO:** _____
FULL TIME: _____ **HOURS PER WEEK**
PART TIME: _____ **HOURS PER WEEK**

SUPERVISOR (if not self-employed): _____

DESCRIBE ALL RELEVANT DUTIES IN DETAIL (If 100% of your responsibilities were/are *NOT* related to the subcode area of licensure sought, and/or building construction or alterations, indicate the percentage of time that was/is, and obtain certification thereof).

_____
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FORM A

Position: _____
Employer: _____
Address: _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____

Dates of Employment
FROM: _____ **TO:** _____
FULL TIME: _____ **HOURS PER WEEK**
PART TIME: _____ **HOURS PER WEEK**

SUPERVISOR (if not self-employed): _____

DESCRIBE ALL RELEVANT DUTIES IN DETAIL (If 100% of your responsibilities were/are *NOT* related to the subcode area of licensure sought, and/or building construction or alterations, indicate the percentage of time that was/is, and obtain certification thereof).