CERTIFICATE IN SUPPORT OF EXAMINEE'S EXPERIENCE QUALIFICATIONS

NOTE: ***Experience must be verified by affidavit or letters with notarized signatures***

Information in this box must be printed or typed

IN THE MATTER OF: _____
First *Middle* *Last*

_____
Street Address *City* *State* *Zip*

CERTIFIER MUST COMPLETE ALL INFORMATION

(See instructions on the back of this form)

I, _____ , certify that I have personally known _____
Certifier *Applicant*

From: _____ / _____ To: _____ / _____ and that I know of my own direct knowledge that said employee was employed by:
Month *Year* *Month* *Year*

_____
Name of Employer *Street Address* *City* *State* *Zip* *Business Phone*

TO BE COMPLETED BY CERTIFIER

From: _____ / _____ To: _____ / _____ as an Apprentice
Month *Year* *Month* *Year*

From: _____ / _____ To: _____ / _____ as a _____ Journeyman _____ Contractor
Month *Year* *Month* *Year*

For a total of: _____ Hours of verifiable electrical construction experience
One (1) year full-time employment equals two thousand (2,000) hours

Percent of work experience by classification:
Commercial Industrial _____ Residential (1 & 2 Family) _____ Oilfield _____ Other _____

DESCRIBE IN DETAIL THE TYPE OF WORK PERFORMED BY THE EXAMINEE. PLEASE DETAIL ALL ELECTRICAL AND CONSTRUCTION WORK PERFORMED.

_____

_____
(For additional space, see next page)

Did the examinee demonstrate a level of knowledge and skill expected of a journeyman or contractor in the electrical construction trade listed above? Yes No

Check which identifies your business relationship to the examinee:
Employer _____ Other, specify work relationship _____ *(see instruction sheet)*

I certify under penalty of perjury under the laws of the State of Oklahoma that the foregoing is true and correct.

_____ _____ / _____ / _____
Signature of Certifier Month Day Year

If you are a licensed electrical contractor journeyman _____ _____
Circle one of above *License Number* *State*