RETAKE JOURNEYMAN ELECTRICIAN

NASCLA Journeyman Exam Journeyman Exam		
NAME IN FULL:		
NAME IN FULL:(Last)	(First)	(Middle)
RESIDENCE ADDRESS:		
(City)	(State)	(Zip Code)
TELEPHONE NUMBER WITH AREA C	ODE:	
EMAIL ADDRESS:		
Last Four SSN:		
SIGNATURE OF APPLICANT		_

THE COMPLETED APPLICATION MUST BE RETURNED ALONG WITH THE EXAMINATION FEE OF \$115.00 IN THE FORM OF CASHIERS CHECK OR MONEY ORDER (PERSONAL CHECK AND BUSINESS CHECKS WILL NOT BE ACCEPTED)

PLEASE MAKE CHECKS PAYABLE TO: ALABAMA ELECTRICAL CONTRACTORS BOARD

SUBMIT TO: The Alabama Electrical Contractors Board 2777 Zelda Road Montgomery, AL 36106