



State of Idaho  
Division Of Occupational and Professional Licenses  
Idaho Electrical Board

**BRAD LITTLE**  
Governor  
**RUSSELL BARRON**  
Administrator

11341 W Chinden Blvd.  
P.O. Box 83720  
Boise, ID 83720-0063  
(208) 334-3233  
dopl.idaho.gov

## Electrical Journeyman Application Instructions

Electrical Journeyman applicants have several pathways for licensure, outlined below. The Idaho Apprenticeship School and Work Experience Pathways require a passing examination score prior to the issuance of a license.

Please review the following information carefully prior to submitting your application.

### Idaho Apprenticeship School Pathway

1. Attended and completed a board approved Electrical Apprenticeship Program:  Yes  No
  - College of Southern Idaho
  - College of Western Idaho
  - College of Eastern Idaho
  - Idaho State University
  - Lewis-Clark State College
  - North Idaho College
  - Porter House Inc. -  
(Shelley and Mountain Home)
  - IEC Idaho
  - Southwest Idaho Electrical JATC
  - Eastern Idaho Electrical JATC
  - DC Electric Inc.
  - Treasure Valley Community College
  - Faith Technologies Incorporated
2. Work Verification Form proving 8,000 hours of supervised electrical installation work has been completed. \*  Yes  No  
NOTE: Applicants may take the examination upon completion of an approved 4-year apprenticeship program, however, a license will not be issued until the applicant provides proof of 8,000 hours of supervised electrical installation work.
3. Held an active Idaho Electrical Apprentice Registration while completing the required 8,000 hours of supervised work. \*  Yes  No

### Work Experience Pathway

1. Work Verification Form proving 16,000 hours of supervised electrical installation work has been completed. \*  Yes  No

### Reciprocity Pathway

1. License Verification Form completed by the state of licensure. Verification must show:  Yes  No
  - Proof of licensure by examination
  - List of requirements for licensure from other state (hours worked, schooling, etc)
  - Status of license (Must be Active)
  - Date license was originally issued

\*Work experience in appliance repair, motor winding, or communications will not count towards the requirements to obtain a provisional journeyman or journeyman license.



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## Electrical Journeyman License Application

Statutes and Rules governing the Idaho Electrical Board can be viewed at <https://dopl.idaho.gov>. It is your responsibility to ensure you read and understand the requirements to perform work in Idaho. Please be sure to keep a copy of this application for your records. Licenses are non-transferable.

Select Application Type:

- Initial/Testing  
(\$15.00 processing fee)
- Reciprocal  
(\$15.00 processing fee)
- Reopen Closed License  
(\$15.00 processing fee)

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**All fields within this application are required. If any field is left blank, the application will not be processed.**

Name (First, Middle Initial, Last): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(Required by Idaho Code § 73-122)

Mailing Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Applicant Email: \_\_\_\_\_  
(Required by Idaho Code § 67-2609)

Are you or your spouse an active member or honorably discharged veteran of the United States Armed Services?  Yes  No

Are you currently licensed as an Electrical Journeyman in another jurisdiction?  Yes  No  
If yes, a **License Verification Form** completed by the state of licensure must be submitted with this application; A copy of your license cannot be accepted.

Applicant Checklist:

- Non-Refundable Processing Fee (do not send cash)
  - Complete and Signed Application
  - Work Verification Form(s)
  - Certificate of Completion from an Idaho Apprenticeship School, if applicable
  - License Verification Form from another state, if applicable
  - Proof of Military or Veteran Status (DD-214), if applicable
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**Certification**

I hereby certify, to the best of my knowledge, the information on this application is true and correct. I understand my license may be suspended, revoked, or otherwise disciplined if it was obtained through false information. I further understand the Division of Occupational and Professional Licenses may release information contained in licensing applications as required by law. I understand that I have one (1) year from the date of this application to take and pass the required licensing examination and that I will be required to submit a new application at the expiration of that period.

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Signature of Applicant

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Date

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**Send your application via:**

**Email:** [customer-service@dopl.idaho.gov](mailto:customer-service@dopl.idaho.gov)

**Mailing Address:**

Idaho Division of Occupational and Professional Licenses  
C/O Trade Licensing  
PO Box 83720  
Boise, ID 83720-0063

**In-Person:**

11341 W Chinden Blvd. Boise, ID 83714  
1250 Ironwood Dr. Ste 220 Coeur d'Alene, ID 83814  
155 N. Maple St. Blackfoot, ID 83221

## Work Verification Form – Electrical Journeyman Licensure

Complete a separate form for each employer and/or state where work experience was obtained.

Applicant Full Legal Name: \_\_\_\_\_

Applicant License/Registration Number: \_\_\_\_\_

Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Email Address: \_\_\_\_\_

Supervising Electrician Name: \_\_\_\_\_

Supervising Electrician License Number: \_\_\_\_\_

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### Number of Hours Worked

Work experience in appliance repair, motor winding, or communications will not count towards the requirements to obtain a provisional journeyman or journeyman license.

Dates of Verification: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
mm dd yyyy mm dd yyyy

Total Number of Electrical Installation Experience Hours: \_\_\_\_\_ hours

Was all work completed in the state of Idaho?  Yes  No

If no, list the state where the work was completed: \_\_\_\_\_

Note: If claiming overtime, a paycheck stub identifying hours worked must be provided upon request.

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### Certification

Upon oath I certify each of the following: the responses and information provided in this verification are true and correct to the best of my knowledge; falsification of any information could lead to discipline including but not limited to revocation of licensure; and any of the hours submitted are subject to additional verification.

Verifier Printed Name (if other than applicant): \_\_\_\_\_

Verifier Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## CREDIT CARD AUTHORIZATION FORM

Idaho Division of Occupational & Professional Licenses  
11341 W Chinden Blvd, Bldg #4  
Boise, ID 83714  
Phone: 208-334-3950  
Email: [customer-service@dopl.idaho.gov](mailto:customer-service@dopl.idaho.gov)

I, \_\_\_\_\_, authorize the State of Idaho Division of Occupational & Professional Licenses to charge my credit/debit card account in the amount of \$\_\_\_\_\_. Please note there is an additional 3% charge for the use of your card through Access Idaho

**This payment is for:**

- |   |  |
|---|--|
| <input type="checkbox"/> License/Registration Application Fee | <input type="checkbox"/> New License Fee     |
| <input type="checkbox"/> New Permit Fee                       | <input type="checkbox"/> License Renewal Fee |
| <input type="checkbox"/> Fee Due on Existing Permit           | <input type="checkbox"/> Other: _____        |

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Credit Card Number:

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Expiration Date:

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CVC:

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Billing Address Zip Code:

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Cardholder Signature

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Date

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Phone Number

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Email Address for Receipt