



CONTRACTORS LICENSE BOARD

Guahan Inetnon Manlisenasiyen Kontratista

542 N. Marine Drive Suite A, Tamuning, Guam 96913

Tel: (671) 649-9676/(671) 649-2211/ (671) 649-2214 or (671) 649-2210 (Fax)



Master Electrician Application & Information Packet

QUALIFICATIONS & REQUIRED DOCUMENTS:

The applicant must have seven (7) years of experience in the electrical field. An application (attached) must be completed and submitted to our office, with one passport size photo, prior to scheduling of examination. All applicants must pass the part written examination. The examination is closed book.

The above photograph shall be an un-mounted recognizable photograph (size 2"x 2" overall) not profile, not retouched, taken within 30 days of submission of this application. Affix your signature and date on the lower right hand corner of the photograph.

Photostats of diplomas or certified transcripts of all college courses and degrees must accompany this application. Employers listed in the application may be contacted by the Contractors License Board, Government of Guam for verification of experience. This information must be received before the application will be considered. Therefore, it is necessary that complete names and addresses be included.

Master Electricians

Will be tested on definitions, specification and requirements of the National Electrical Code (NEC), and National Fire Code (NFC). In addition, the examinations will cover installation requirements of electrical systems and its public buildings; as well as, fundamental electrical principals, transformers, motors, wire sizing, feeders, voltage drop, control circuits and other related criteria essential in Electrical Construction, Operations and Maintenance and practical application of electrical formulas for design and calculations.

All applicants must obtain a passing grade of 70% for each part of the examinations. If the applicant fails any part of the examination, he/she will be required to retake the examination. Once the passing grade has been achieved the applicant must obtain clearances from the Department of Revenue and Taxation for certification to be issued. Each certification is valid for a two year period beginning of July 1st and expiring on June 30th.

An application fee of \$25.00 must be paid upon submittal of the application. In order to receive certification, the certification fee of \$75.00 must be paid.

The Executive Director of the Contractors License Board reserves the right to reject any application submitted based on falsification of information provided by the applicant, crimes or offenses of a felony in nature and any judgment of moral character determined by the references stated by the applicant. Any certification issued may be revoked or suspended by the Executive Director if found to be in violation of the National Electrical codes, Government of Guam Code, Contractors License Board Rules and Regulations and/or crimes involving abuse of the Certifications.

Should you have any questions or require further assistance, please feel free to contact our office.



Application for Original Certification For Master Electrician



Please Type or Print Legibly in Ink

Name of Applicant	Social Security Number
Mailing Address	Telephone Number(s)
Residential Address	Date of Birth
Email Address	Citizenship

If you hold a current license or certificate as a Master Electrician, please complete the following information:

Issuing State or Country	Issue Date	Expiration Date

Please answer the following questions. If you answer “yes” to any of the following, please attach your explanation on a separate sheet of paper. If you were convicted of any criminal offense, please indicate, the date of conviction, sentence and the date sentence was completed.

Has your certificate/license ever been revoked? Yes No

Have you ever been denied application in any state or territory for a Master Electrician license or certificate? Yes No

Have you ever been convicted of a criminal offense, other than traffic violations? Yes No

Do you have any outstanding judgments against you? Yes No

WORK EXPERIENCE

Number each engagement in order, beginning with your present engagement in the practice of Electrical. Design or Installation. Summarize each engagement, but provide sufficient detail to signify the degree of your responsibility and the nature of the decisions you have been required to make.

Name of Company		Telephone Number(s)	
Mailing Address and Email Address:		Name & Title of Supervisor	
Date of Employment (mo/yr. to mo/yr.)	Total Months Employed	Type of Business	

WORK EXPERIENCE

Name of Company		Telephone Number(s)	
Mailing Address and Email Address		Name & Title of Supervisor	
Date of Employment (mo/yr. to mo/yr.)	Total Months Employed	Type of Business	

WORK EXPERIENCE (Continued)

Name of Company		Telephone Number(s)	
Mailing Address and Email Address:		Name & Title of Supervisor	
Date of Employment (mo/yr. to mo/yr.)	Total Months Employed	Type of Business	

WORK EXPERIENCE

Name of Company		Telephone Number(s)	
Mailing Address and E-Mail Address:		Name & Title of Supervisor	
Date of Employment (mo/yr. to mo/yr.)	Total Months Employed	Type of Business	

REFERENCES

List three (3) references, one of which must be in the profession of designing, construction and inspection of electrical field. These references must have personal knowledge of your professional experience and qualifications as well as your moral character.

Name	Address (must be completed)	Telephone Number

Of the references above, which individual is in the profession of designing, construction and inspection of electrical? _____

ORGANIZATION MEMBERSHIPS

List the organizations that you are a member, in good standing, of below.

Organization	Address	Telephone Number

I declare under penalty of perjury, under the laws of the Territory of Guam, that the foregoing information and documents attached hereto are true and correct. (6GCA & 4308)

Signature of Applicant

Date