



Request to extend an Electrician's Training Licence for a Pre-apprentice

Form R117A

(Suitable for applicants who have a **current** Electrician's Training Licence and have had their pre-apprenticeship extended)

Application Checklist	<p>Use this checklist reminder to ensure that you complete all parts of the application and attach all necessary documents.</p> <p><input type="checkbox"/> Licence details completed.</p> <p><input type="checkbox"/> Personal and contact details completed.</p> <p><input type="checkbox"/> Registered Training Organisation section completed.</p> <p><input type="checkbox"/> Declaration completed.</p> <p>Please print neatly in BLOCK LETTERS with a black or blue pen.</p>
Licence details	<p>Electricians Training Licence number _____</p> <p>Note: If your training licence has expired please complete the application form - "Application for an Electrician's Training Licence for a Pre-apprentice".</p>
Applicant Details	<p>Applicant Details</p> <p>Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other</p> <p>Surname: _____</p> <p>Given Names: _____</p> <p>Date of Birth: _____</p>
Residential address*	<p><i>*Required for publication on the Register. Cannot be a PO Box.</i></p> <p>Residential Address: _____</p> <p>Suburb: _____ State: _____ Postcode: _____</p>
Postal address*	<p><input type="checkbox"/> As above <i>*Address for correspondence from the Department.</i></p> <p>Postal Address: _____</p> <p>Suburb: _____ State: _____ Postcode: _____</p>
Contact details	<p>Home Phone: _____ Work Phone: _____</p> <p>Mobile Phone: _____</p> <p>Email: _____</p> <p><i>*Required to receive courtesy renewal reminder notifications via SMS and email and other important notifications relevant to your licence</i></p>

<p>This section is to be completed when enrolled with a RTO</p>	<p>Name of the Registered Training Organisation (RTO)</p> <p>Trading Name: _____</p> <p>Campus/site the pre-apprentice will be attending: _____</p> <p>Phone Number (Business): _____</p> <p>Contact Name: _____ Phone Number: _____</p> <p>Confirm the term of Pre-apprenticeship</p> <p>Completion Date of Pre-apprenticeship Training: _____</p>
<p>Both RTO and apprentice are required to sign and date this section before submitting application</p> <p>Applicant authorisation →</p>	<p>Declaration by RTO</p> <p>In accordance with regulation 59 of the Electricity (Licensing) Regulations 1991, I declare that the information in this application or any documentation attached by me is complete and true to the best of my knowledge.</p> <p>Print Name of RTO representative: _____</p> <p>Signature of RTO representative: _____ Date: _____</p> <p>Authorisation for RTO to speak to the Department about this application:</p> <p><input type="checkbox"/> Check this box to authorise an RTO representative to speak to the Department of Mines, Industry Regulation and Safety about the status or content of this application, on your behalf.</p> <p>Declaration by apprentice</p> <p>Regulation 59 of the Electricity (Licensing) Regulations 1991 makes it an offence for a person to:</p> <ul style="list-style-type: none"> • falsify any matter pertaining to an application; • provide any document or other evidence relating to qualifications or experience that is forged, false or fraudulent; • provide any document in support of an application that is wrongfully represented as pertaining to the applicant; or • give a false testimonial in connection with this application. <p>By signing this declaration, you give consent to the Electrical Licensing Board, duly authorised officers of the Department of Mines, Industry Regulation and Safety or persons acting on behalf of the Board or the Department to make enquiries and to receive and disclose any information for the purpose of determining this application.</p> <p>Declaration</p> <p>I _____</p> <p>Full name of applicant</p> <p>1 authorise the Electrical Licensing Board, the Department of Mines, Industry Regulation and Safety or persons acting on behalf of the Board or the Department to make enquiries considered necessary to assess this application. My general consent includes the specific consent to the acquisition of copies of my criminal records. I agree that the Board can use any or all information received pursuant to this authority for the purposes of the assessment or audit of this application; and</p> <p>2 sincerely declare that this application is true and correct.</p> <p>_____ Signature</p> <p>_____ Date</p>

You may lodge your completed application:

By post addressed to:

Licensing Services

Department of Mines, Industry
Regulation and Safety
Locked Bag 100,
EAST PERTH WA 6892

In person at:

Customer Service

Level 1, Mason Bird Building
303 Sevenoaks Street
CANNINGTON
Hours: 8:30am to 4:30pm
Monday to Friday

Electronic:

Email

electricallicensing@dmirs.wa.gov.au

Enquiries Only

Telephone: (08) 6251 2000

Email:

electricallicensing@dmirs.wa.gov.au

Internet

www.dmirs.wa.gov.au/building-and-energy