

Request for School Credit
Toward CONTINUING EDUCATION
for
POWER LIMITED TECHNICIAN LICENSE

I am requesting the Minnesota Statewide Limited Energy JATC to verify that I have completed a minimum of eight (8) hours of continuing education which included a minimum of two (2) hours of Code.

Please PRINT CLEARLY

Name			
Address			
City, State, Zip Code			
Power Limited Technician License Number		Last 4 digits of Social Security #	
Signature			

Dates of attendance to be verified per this request is:

(list dates) _____ TO _____

I was attending _____ year of **Installer / Technician** apprenticeship training.
(circle one)

Please attach photocopy of your Power Limited Technician License. **DO NOT PAY OUR JATC** FOR THE FEE THAT WILL BE DUE TO THE STATE OF MINNESOTA FOR YOUR LICENSE RENEWAL.

**Return this form with a copy of your
Power Limited Technician License to our
office at:**

Statewide Limited Energy JATC
452 Northco Drive, Suite 140
Fridley, MN 55432-3307

Fax #: 763-571-5928