

Application for Certification

Municipal Association of South Carolina
1411 Gervais Street | PO Box 12109 | Columbia, SC 29211
803.933.1209 | FAX: 803.933.1299

Name _____
Last First Middle I.

Daytime Phone No. (____) _____ Mobile Phone No. (____) _____

Last Four Digits of Social Security Number _____

Email address _____

Address _____
Street Address or P.O. Box City State Zip

Education: (Circle highest grade completed) Grammar School 1 2 3 4 5 6 7 8
High School 9 10 11 12 College 1 2 3 4

<u>Technical Schools Attended</u>	<u>Degrees or Certificates Earned</u>	<u>Dates Attended</u>
_____	_____	_____
_____	_____	_____

(Copies of Degrees/Certificates must be attached to this application)

I hereby make application to the Municipal Association of SC for certification as (*Check one*)

- | | |
|--|--|
| <input type="checkbox"/> Master electrician | <input type="checkbox"/> Journeyman unlimited AC |
| <input type="checkbox"/> Residential electrician (also master) | <input type="checkbox"/> Pipefitter journeyman |
| <input type="checkbox"/> Journeyman electrician | <input type="checkbox"/> Master plumber |
| <input type="checkbox"/> Journeyman electrician, residential | <input type="checkbox"/> Journeyman plumber |
| <input type="checkbox"/> Gas contractor (master) | <input type="checkbox"/> Master residential plumber |
| <input type="checkbox"/> Gas journeyman | <input type="checkbox"/> Sheet metal contractor (master) |
| <input type="checkbox"/> HARV (master mechanical) | <input type="checkbox"/> Sheet metal journeyman |

Qualifications:

- Candidates holding a trades certification card from a municipality or county can take the corresponding (journeyman or master) examination.
- If an applicant does not hold a trades certification card as required above, the following criteria applies.
 - Journeyman** - Applicant shall have a minimum of two years of full-time electrical/plumbing/gas/heating and air/sheet metal installation experience under the supervision of a journeyman or master of the trade. **The employer must document this experience in writing, giving the specific dates of employment and a general description of the duties performed by the applicant.** Formal, technical and vocational training by accredited training institutions may be considered as a qualifying factor. Completion of a two-year degree from an accredited technical college can be counted as one year of experience.
 - Master** - Applicant must be a certified journeyman and worked at least four years in the trade at least two years of which shall be under the supervision of a qualified master of the trade. **The employer must document this experience in writing, giving the specific dates of employment and a general description of the duties performed by the applicant.** If 10 years of experience in the trade can be documented, the journeyman requirement can be waived.
 - Master residential plumber** - Applicant must have four years' experience in the trade with at least two years under the supervision and control of a qualified master of the trade. **The employer must document this experience in writing, giving the specific dates of employment and a general description of the duties performed by the applicant.**

Present Employer _____
 Name of Company _____ Address _____
 Kind of Business _____ Your Position _____
 Dates of Employment: From _____ To _____ Name of Supervisor _____
 Describe your Duties _____

2nd Last Employer _____
 Name of Company _____ Address _____
 Kind of Business _____ Your Position _____
 Dates of Employment: From _____ To _____ Name of Supervisor _____
 Describe Your Duties _____

3rd Last Employer _____
 Name of Company _____ Address _____
 Kind of Business _____ Your Position _____
 Dates of Employment: From _____ To _____ Name of Supervisor _____
 Describe Your Duties _____

List Trade Certification Cards or Licenses presently held.

- | | | | | |
|----|---|--------------|----------------|-------------|
| 1. | _____ | _____ | _____ | _____ |
| | Certification/License
(journeyman or master) | Exam Sponsor | Card
Number | Date Issued |
| 2. | _____ | _____ | _____ | _____ |
| | Certification/License
(journeyman or master) | Exam Sponsor | Card
Number | Date Issued |

Copy of cards must be attached to this application.

I hereby grant the Municipal Association of South Carolina permission to verify any information contained herein. I understand that any misrepresentation of facts will be just cause for the Municipal Association of South Carolina to reject the consideration of this application.

Signature of Applicant _____ Date _____

- **Include your check or money order in the amount of \$25. The Municipal Association will not process the application unless it is signed and payment is included.**

(Make check or money order payable to MASC)
 Personal and company checks are accepted

Do not include any payment to PROV with this application.