Department of **Local Government, Industry Regulation and Safety**

GOVERNMENT OF WESTERN AUSTRALIA

Building and Energy Western Australia

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Form R116: Electrician's training licence

Use of this form
An Electrician's Training Licence allows apprentices and trainees in WA to legally perform electrical work under supervision while completing their training.

Licence duration
If your application is approved, your licence will be granted for six years.

Registration and application fees
Visit our Fee Schedule page for current application fees.
GST is not payable on the application fee.

Registration requirements
To be considered for a licence you must:
provide a complete application including payment of application fee; have the required qualifications and experience; be a fit and proper person; and comply with any other requirements.

Incomplete applications
The Department does not accept incomplete applications. If your application is incomplete your application may be lapsed or refused and the application fee may not be refunded.

Help with your application
Internet: www.lgirs.wa.gov.au/building-and-energy
Telephone: (08) 6251 2000
Email: electricallicensing@lgirs.wa.gov.au (Do not email form)

Checklist

- ☐ Form fully completed and declaration completed
- ☐ Police check provided
- ☐ Application fee

Complete your application

Your application cannot be processed unless all sections are completed, all attachments provided and fees paid.

How to submit

Online
Submit your application and pay online:
https://onlineforms.dmirs.wa.gov.au/#/form/6322a0c5895b-d903e4ff92c7

Scan with your phone for online application portal

By post
Locked Bag 14, CLOISTERS SQUARE, PERTH WA, 6850
If submitting by post, complete Application Payment Form: https://www.wa.gov.au/media/73896/download? inline and attach it to your application.

In person
Applications can be lodged during business hours 8.30am - 4.30pm.
Level 1, 303 Sevenoaks Street CANNINGTON 6107
Acceptable payment methods are Credit Card (Visa/Mastercard) cash, cheque, money order or EFTPOS.

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Please ensure you have provided all required information and supporting documentation as per the application checklist. Failure to submit a complete application may result in the cancellation of your application and loss of the application fee.

Applicant Details

PLEASE PRINT IN BLOCK LETTERS

Pathway:

☐ Pre-apprenticeship ☐ Apprenticeship

First name: Family name:

Other name(s): Date of birth: / /

Residential address

Street address:

Suburb: State: Postcode:

Postal address

☐ As above Street address or PO Box:

Suburb: State: Postcode:

Contact details

Phone (mobile):* Phone (home): Phone (work):

Email:*

***Required to receive courtesy renewal reminder notifications by SMS and email and other important information relevant to your registration.**

Fit and Proper Assessment

☐ Attached copy of Australian police check. The date of issue of the police check must be within three (3) months of the date you submit this application. For more information visit: https://www.wa.gov.au/organisation/service-delivery/police-checks-licensing.

Scan with your phone for more information

Proof of Identification

☐ Attached copies of identification in accordance with the Proof of ID requirements, available here: https://www.wa.gov.au/media/50915/download?inline.

Scan with your phone for more information

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Safety Assessment

Your employer will give you a copy of the Safe working guidelines for electrical workers and apprentices. You must then complete the Apprentice safety assessment test.

Employer/RTO declaration

I _____ holder of licence number EW _____

full name of supervisor (for apprenticeships) or
full name of RTO representative (for pre-apprenticeships)

(Electrical licence number)

hereby confirm that _____

(full name of applicant)

- has been instructed, interviewed and assessed in accordance with the Safe working guidelines and assessment for electrical apprentices. I consider that he/she has a satisfactory knowledge (80% score or above) and understanding of the material provided in the Safe working guidelines and assessment for electrical apprentices and is aware that he/she is obliged to apply them in the workplace.
- is enrolled in a Certifcate II in Electrotechnology (Career Start) or apprenticeship.
- In accordance with regulation 59 of the Electricity (Licensing) Regulations 1991, I declare that the information in this application is complete and true to the best of my knowledge.

Signature of supervising Electrician or RTO: Date:

(dd/mm/yyyy)

Applicant declaration

Regulation 59 of the Electricity (Licensing) Regulations 1991 makes it an offence for a person to:

- falsify any matter relating to an application;
- provide any document or other evidence in support of the application that is forged, false, fraudulent or wrongfully represented as pertaining to the applicant;
- make a false statement in this declaration; or
- give a false testimonial to any person in connection with this application.

By signing this declaration, you give consent to the Electrical Licensing Board, duly authorised officers of the Department of Local Government, 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.

Declaration

I _____

(full name of applicant)

1. confirm that I have been given a copy of the Safe working guidelines and assessment for electrical apprentices and that I was assessed as shown above. I understand the requirements of the Guidelines. I am aware of my obligations to apply safe working practices in the workplace.
2. authorise the Electrical Licensing Board, the Department of Local Government, 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
3. sincerely declare that this application is true and correct.

Signature of applicant: Date:

(dd/mm/yyyy)