

CITY OF LAWRENCE

Neighborhood Resources Dept., Plan Review/Licensing Division
1 Riverfront Plaza, Suite 110, Level 1
P.O. Box 708
Lawrence, Kansas 66044
(785) 832-7700 Fax (785) 832-3110
www.lawrenceneighres.org

TRADE SPONSORSHIP APPLICATION

Type of License Applying For:

- Electrical Residential Journeyman Master
 Plumbing Journeyman Master
 Mechanical Residential A/C Journeyman Sheet Metal Journeyman Unlimited A/C Master

Name: _____	Email Address: _____
Mailing Address: _____	City: _____ State: _____ Zip Code: _____
Telephone No. _____	Work No. _____ Cell Phone No. _____
Social Security No. _____	

Enclose copies of your union card, apprenticeship card or other trade licenses. Employment listed should be of thirty (30) days or more duration. Please list the most current information first. Incomplete or illegible applications will be denied. Please allow a minimum of 7 business days for processing.

- Journeyman exam-List a minimum of three (3) years employment.
- Masters exam-List a minimum of six (6) years employment.
- Master Plumber exam-a minimum of six (6) years employment; three (3) years as a journeyman plumber

Employed From: _____ To: _____ (Total) _____

Employer: _____

Address: _____

Phone: _____

Duties: _____

Employed From: _____ To: _____ (Total) _____

Employer: _____

Address: _____

Phone: _____

Duties: _____

Employed From: _____ To: _____ (Total) _____

Employer: _____

Address: _____

Phone: _____

Duties: _____

Employed From: _____ To: _____ (Total) _____
Employer: _____
Address: _____
Phone: _____
Duties: _____

Education-List relevant college, vocational or trade education.

Name of School: _____
Address: _____
Field of Study: _____
Graduated: Yes No

I certify that all statements made in this application are true and I understand that any false statements on this application shall be considered sufficient cause for disqualification.

Date

Signature

Staff Use Only	
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Reviewed By:	
Date Reviewed:	