Form A - Work Experience/Project Information

Please print out and fax the following, along with your receipt, to 1.478.314.5805

State Licensing Board for Residential and General Contractors

APPLICANT NAME
(Print clearly)

APPLICANT TRACKING CODE
(Found on receipt page)

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ATTACHMENT #1

Work Experience Information (must show 2 years in the chart below) **Please have Employment/Projects Affidavit (Form K) completed and submit it along with this application.** NOTE: You may sign the affidavit as both the applicant and contractor ONLY if you have been self-employed for the required amount of years. ALSO NOTE: The chart below is NOT for specific project information, but for dates of employment. That is, the dates you have been employed with the employer listed in the first column, NOT the dates you began and completed a particular project.

Employer Name & Address	Direct Supervisor	Employment Dates	Position Title	Type of Work Performed

Part 4: Projects Completed: List 2 residential-basic projects completed within 2 years immediately preceding date of application submission. **Please have Employment/Projects Affidavit (Form K) completed and submit it along with this application.**

Street Address Of Project	Completion Date of Project	Employer at time of Completion	Address of Employer	Telephone Number of Employer