Department of Inspections, Appeals, & Licensing

RESIDENTIAL ELECTRICIAN POST SECONDARY ELECTRICAL PROGRAM (PSEP) CERTIFICATION STATEMENT

_____ Of _____,
(Institutions' Name) ***(Institution's City, State, Zip)***

Is requesting approval by the Iowa Electrical Examining Board to host a State of Iowa approved PSEP that meets or exceeds PSEP Board rule.

*I (as the PSEP Dean have been furnished a copy of the Electrical Board's policy and attest that the above information is true and accurate to the best of my knowledge. I realize submitting false or misleading information to the Electrical Examining Board could be grounds for suspension or revocation of _____ ***(Institution's Name)*** 's Post-Secondary Electrical Program.*

I hereby certify that the information submitted to the Electrical Examining Board represents our PSEP and meets the requirement set forth by the Electrical Board PSEP rule. I also certify that I will notify the Board IMMEDIATELY if the approved or any of the program's elements have been altered or discontinued.

_____
(Signature of Institution's Dean)

State of _____

County of _____

Signed and sworn to (or affirmed) before me on _____
Date

By_____

_____
Name(s) of Person(s)

_____
Signature of Notary Public

_____
Title (or Rank for Military Personnel)

Seal