

**Electrical Code Update Course Certificate of Completion**

Michigan Department of Licensing and Regulatory Affairs

Bureau of Construction Codes / Electrical Division

P.O. Box 30254, Lansing, MI 48909

517-241-9320

Authority: 1956 PA 217

**Instructions:**

**Course Provider:** Complete Course Provider information including course approval number (classes shall have prior approval and assigned an approval number by the Electrical Division).

**Instructor:** Complete the student information accurately in its entirety. Sign Certificate of Completion upon course completion. Provide the completed original certificate to licensee and retain a copy for your records.

**Course Provider**

NAME		COURSE APPROVAL NUMBER	
ADDRESS			
CITY	STATE	ZIP CODE	

**Student Information**

NAME		LICENSE NUMBER(S)	
ADDRESS			
CITY	STATE	ZIP CODE	

**Signature**

INSTRUCTOR'S SIGNATURE	INSTRUCTOR'S NAME (Printed)	DATE
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