



Examination Entity Application
 Alarm, Locksmith, and Fire Sprinkler Program
www.oklahoma.gov/labor

OKLAHOMA DEPARTMENT OF LABOR
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 Oklahoma City, OK 73105
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APPLICATION TYPE:

- New
- Renewal

REQUIRED DOCUMENTATION TO BE SUBMITTED WITH APPLICATION:

- **FOR NEW EXAMINATION ENTITY*:**
 - Test Questions with Answers
 - Must Notate How Questions Match Up With Standards (Cross Walk)
 - Must Show How Questions Satisfy the Number of Questions Required For Each Standard
 - Dates and Locations of Offered Courses
 - Proctor of Exams
- **FOR EXAMINATION ENTITY RENEWING***
 - Dates and Locations of Offered Courses
 - Any Changes to Examination Must Be Approved by ODOL

*Required Documentation Can Be Submitted On However Many Pages Are Needed

Entity Name:

Physical Address:

City:

State:

Zip Code:

Mailing Address (if different):

City:

State:

Zip Code:

Email Address:

Contact Person for Entity (Please Include Name, Email Address, and Phone Number):

EXAMINATIONS ENTITY IS APPLYING FOR:

- Burglar Alarm/Residential Fire Alarm
- Commercial Fire Alarm
- Nurse Call
- Electric Access Control
- Closed Circuit Television
- Locksmith
- Fire Sprinkler

I certify the information given on this application by me and on the attached documents is true and accurate to the best of my knowledge. I understand that false information could result in abrogation of the ability to offer present and future courses.

Signature of Applicant / APPLICATION CANNOT BE PROCESSED WITHOUT A SIGNATURE

DATE

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The Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

Date:

Lic #:

Initials: