ELECTRICAL LICENSE CONTINUING ED CLASSES – APRIL '14

Analysis of Changes in the 2014 NEC
(For ALL Electrical License Types)

This **State of Oregon approved, 8-hour, code-change** class will be provided in two parts (per session choice) at the main campus of Lane Community College, 4000 East 30th Avenue, Eugene, Oregon. <u>Please allow extra time if you are not familiar with the LCC campus.</u>

1) 4-16 & 18 on Wednesday & Friday 5:00 to 9:00 PM at <u>Building #19 in Room 241</u>.

2) 4-30 & 5-2 on Wednesday & Friday 5:00 to 9:00 PM at <u>Building #15 in Room 206</u>.

(Note: Building # 19 is also known as "Workforce Training" and Building # 15 is the "Electronics" building.)

<u>Both 4-hour sessions of the selected class sequence (either "1" or "2" above) must be attended to receive the 8 hours of code-change credit -- or NO CREDIT can be given at all.</u>

This class will be supplemented with handouts as required in OAR 918-035-0050. Attendees should bring their own 2014 NEC book and something to write with to gain the maximum benefit from attending this presentation.

The non-refundable cost for this **8-hour code-change (CC) class** is only $60.

<u>CLOSING DATE FOR REGISTRATION IS 1 WEEK BEFORE THE SCHEDULED CLASS DATE.</u>
Those unable to meet this deadline, or for other questions, should contact Jim Davis at (541)345-9318 or by e-mail at jimcodeman@gmail.com .

<u>TO REGISTER:</u> Complete the section below and send it and a check or money order in the proper amount, made out to *Electrical Education Services, LLC (*or ***EES, LLC)***, to:
EES, LLC; P. O. Box 12253; Eugene, OR 97440.

Detach and send in the section below. Keep this part for future reference.

NAME_____ PHONE #_____
            LAST   FIRST   MI

ADDRESS_____
                NUMBER & STREET   CITY   STATE   ZIP

LICENSE #(s) & STATE _____ E-MAIL ADDRESS _____

NAME OF EMPLOYER (optional) _____

Your birth date is needed for the Lane Community College student database and continuing education transcript, if you are not already in their records.
DATE OF BIRTH: (mm/dd/yy)_____