



\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Day Telephone Number

\_\_\_\_\_  
Email Address\*

**\*if further information is needed, email is the most efficient way for Board staff to contact you so that your application can be processed in the most efficient manner. Your email will not be shared with third parties.**

How many times have you previously taken the Georgia Practical examination? \_\_\_\_\_

List the location(s) and date(s):

\_\_\_\_\_

\_\_\_\_\_

I attest that the information I have provided is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date