Commonwealth of Massachusetts
Board of Registration in Medicine
Committee on Acupuncture
200 Harvard Mill Square Suite 330
Wakefield, Massachusetts 01880
Telephone: (781) 876-8210

APPLICATION TO RETIRE FROM THE PRACTICE OF ACUPUNCTURE IN MASSACHUSETTS

If you wish to retire from the practice of acupuncture, you must prepare a written statement, signed under the penalties of perjury, notifying the Committee on Acupuncture (COA) of your intent to retire from the practice of acupuncture. In this written statement, you must also detail your knowledge of any present or future complaints against you, and must agree that you will make your patient records accessible in accordance with 243 CMR 5.09(3). This regulation provides that a retiring licensee, his successor, or his estate must retain patient records in a manner which permits his former patients and their successor acupuncturists access to them for a minimum period of seven years, or until a child patient reaches the age of nine.

After completing this form and preparing your written statement, <u>send this form, your written statement and your license wallet card</u> to the Acupuncture Unit at the above-listed address. If there are no complaints against you, the Acupuncture Unit will complete this form and return a copy of the form to you for your records.

Please note that retirement is a final action, meaning that you may not reactivate your license after retiring. Verification of receipt of the Application to Retire will be sent to the licensee.

Please Print Clearly or Type:

1. Name: (Last)_____ (First)_____ (M.I.)_____

2. Mailing
    Adress: _____

    _____

3. City, State, Zip: _____

4. License Number: _____   Date of Birth: _____/_____/_____

6.   Expected Date of Retirement:_____/_____/_____

I,_____ request retirement
              (Signature of Licensee)

status. I certify that I will not practice acupuncture in Massachusetts.

Signed under the pains and penalties of perjury this _____ day of _____,

2_____

To Be Completed by the Acupuncture Unit

Committee on Acupuncture Approval Date_____