



Division of Occupational Licensure

Office of Public Safety and Inspections

1 Federal Street, Suite 0600, Boston, MA 02110-2012

APPLICATION FOR REFRIGERATION APPRENTICE LICENSE

Application must be filled out in ink and accompanied by a non-refundable \$40.00 processing fee
Processing fee must be in the form of a check or money order made out to the "Commonwealth of Massachusetts"

☐

Check the box if you are requesting examination accommodations due to a disability that substantially limits your ability to perform a major life activity. You must submit an Accommodations Request Form along with the required documentation as part of this application in order for this request to be considered.

Full Name: _____ Social Security No.: _____
(Print Legibly) (Required)

Home Address: _____
(Street) (City) (State) (Zip Code)

Mailing Address: _____
(Street) (City) (State) (Zip Code)

Date of Birth: _____ Email Address: _____ Telephone No.: _____

Name of Employer: _____ Employer's Telephone No.: _____

Employer's Address: _____
(Street) (City) (State) (Zip Code)

Refrigeration Contractor's (RC) Name: _____ RC License No.: _____
(Required)

• List your Massachusetts **Division of Apprentice Standards (DAS)** Registration (ID) Card: _____
(Required)

• Has any disciplinary action been taken or is pending against you by a licensing/certification board located in the United States or any country or foreign jurisdiction? ☐ YES ☐ NO

(If **YES**, please state the details on a separate sheet and attach it to your application.)

AUTHORIZATION FOR RELEASE OF RMV PHOTO INFORMATION

(MASSACHUSETTS RESIDENTS ONLY)

My signature below authorizes the Office of Public Safety and Inspections to electronically access my photograph from the Massachusetts Registry of Motor Vehicles database solely for use on this license/registration.

MA- RMV Photo Release Signature

Did you authorize OPSI to use your RMV photo or enclose a 2" by 2" photo? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did you include a copy of your High School diploma or equivalency certification? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did you include a copy of your <u>Division of Apprentice Standards (DAS)</u> Registration (ID) Card? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did you include your \$40.00 processing fee? <i>(Non-Refundable Check or Money Order)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Under the penalties of perjury I certify that to the best of my knowledge and belief the information in this application is true, I have paid all State Taxes, and I have paid any and all outstanding civil fines owed to the Office of Public Safety and Inspections which are required under Law.

Signature of Applicant

Date

PREREQUISITES:

ALL of the following items **MUST BE SUBMITTED WITH THE APPLICATION** in order for your application to be processed properly. Failure to submit all required information and proper fee will result in ineligibility to take the exam and forfeiture / loss of processing fee.

REFRIGERATION APPRENTICE PREREQUISITES

- ☐ A completed application with proper mailing address and social security number.
- ☐ Attach a 2" x 2" Passport size photo (Unless Authorization for Release of RMV Photo Information Signed-Off)
- ☐ Non-refundable application processing fee (**\$40.00**) in the form of a check or money order made out to the "Commonwealth of Massachusetts".
- ☐ Copy of your **Division of Apprentice Standards (DAS)** Registration (ID) Card.
Division of Apprentice Standards
100 Cambridge Street, Suite 501
Boston, MA 02114
(617) 626-5442
- ☐ Copy of your High School diploma or equivalency certification.

PLEASE MAIL ALL COMPLETED APPLICATIONS, ALONG WITH THE NON-REFUNDABLE APPLICATION PROCESSING FEE, TO THE ADDRESS BELOW:

OFFICE OF PUBLIC SAFETY AND INSPECTIONS
1 FEDERAL STREET, SUITE 0600
BOSTON, MA 02110-2012
ATTN: LICENSING DIVISION