

## Commonwealth of Massachusetts OFFICE OF CONSUMER AFFAIRS DIVISION OF OCCUPATIONAL LICENSURE

## Board of Examiners of Sheet Metal Workers 1 Federal Street, Suite 0600 Boston, MA 02110-2012

### PROJECT APPROVAL APPLICATION <u>APPLICATION FOR APPROVAL AUTHORIZATION TO PERFORM SHEET METAL WORK</u> <u>BY STUDENTS OF A STATE AIDED ALL DAY VOCATIONAL SCHOOL</u>

# PLEASE NOTE: THIS APPLICATION IS NOT APPROVED UNTIL A BOARD STAMPED APPROVAL AUTHORIZATION IS RETURNED TO THE SCHOOL ADMINISTRATOR OR DESIGNEE.

### LOCAL SHEET METAL PERMITS and INSPECTIONS ARE REQUIRED

NAME OF SCHOOL:		TEL:				
ADDRESS:	CITY:	ST	TATE:	ZIP:		
Has this lesson been approved by the local school administration? Yes 🗌 No 🗌						
(A COPY OF THE ABOVE LESSON APPROVAL MUST ACCOMPANY THIS APPLICATION.)						
Name of Licensee who is employed by the school as the Massachusetts Instructor/Department Head who will be the Sheet Metal Permit Holder of Record for this Project:						
Name: Ma	aster License No. or	Journeym	an License No.			
Address:						
Sheet Metal Departmen	nt Head: (Signature Required)	Date:		(mm/dd/yyyy)		

LESSON/PROJECT LOCATION INFORMATION					
Name and Address of Parties for whom work is to be performed:					
Name and Address of Project Lesson Location:					
Type of Project Lesson: [Briefly explain Sheet Metal fixture(s) appliance and equipment installation. Include: Types of materials to be used.					
include. Types of materials to be used.					
If Applicable to the Anticipated Project: (A COPY OF THE LOCAL BUILDING PERMIT AND SHEET METAL					
BLUEPRINTS/DRAWINGS MUST ACCOMPANY THIS APPLICATION.)					
1. Type of Building: Residential New Old					
2. Number of Stories: 1 2 3 4 Other					
3. Basement: Yes No					
4. What is the projected date to begin the Project? (mm/dd/yyyy)					
5. What is the projected date of completion? (mm/dd/yyyy)					

Students Shall perform work at the project lesson site accompanied by and under the direct supervision of an Instructor who is a Massachusetts licensed sheet metal worker in the employment of and authorized by the Educational Institution of record in this document.

#### Briefly Explain:

(A) How is this Project Lesson intended to benefit the students of your Program?

(B) How will Students be permitted to participate in this Project Lesson?

- (C) What Grade Levels will Participate?
- (D) What is the Number of projected Students Per Sheet Metal Instructor at the Project Lesson Site?

### (E) Additional Licensed Massachusetts Instructors for this Project:

Name:	Master/Journeyperson License #:
Name:	Master/Journeyperson License #:
Name:	Master/Journeyperson License #:
Name:	Master/Journeyperson License #:

FOR OFFICIAL BOARD USE ONLY	BOARD APPROVAL STAMP
APPROVED BY:	
DATE:	