## **Department of State Police**

Crime Laboratory Office of Alcohol Testing 124 Acton Street, Maynard, Massachusetts 01754 Tel. 857-377-3030; E-mail: <u>OATBTOprogram@mass.gov</u>

## **Breath Test Operator Class Registration Application**

## **Police Department/Barracks/Agency – the following are REQUIRED:**

- All fields filled out entirely (including town and zip code), preferably typed.
- Full LEGAL names only.
- Complete one form per class date and time.
- E-mail completed form to <u>OATBTOprogram@mass.gov</u> at least 48 hours prior to the class date.

Class Location	Class Date/Time

Department	Department Address & Zip Code	Department Phone Number

Rank	Last Name	First Name	MI	BATS ID# *	E-mail Address

Contact Name:

Contact Phone Number:

\*For MSP personnel (New or existing), your BATS ID# is "SP" and then your 4-digit MSP ID number. \*For non-MSP personnel, contact your OIC for your BATS ID#; if you are a NEW BTO, enter the last 4 digits of your SSN.

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