

Commonwealth of Massachusetts **Division of Occupational Licensure**

1 Federal Street, Suite 600 • Boston, MA 02110-2012 www.mass.gov/orgs/board-of-state-examiners-of-electricians

Board of State Examiners of Electricians

CEP RENEWAL APPLICATION

1. Type of Provider application (check as applicable and attach listed documents):

☐ Individual Provider Program specific requiremen ✓ \$10,000 bond	A/B program	C/D program				
Proprietary School Prov Program specific requiremer ✓ Bond (based on annu ✓ Provider Agreement	of finance)	A/B program	C/D program			
☐ Trade or Employer instit Program specific requiremen ✓ Provider Agreement		A/B program	C/D program			
Program specific requiremen Provider Agreement \$\sqrt{10,000 bond}\$		A/B program	C/D program			
 Are there changes to this updates), instructors, deliv ☐ Yes (Do not proceed. You Has any of the instructor ☐ Yes ☐ No 	very method, or policie ou must complete a NE	es since being previous W CEP Application)	sly approved as CI No (Continue to	EP? next question)		
Institution		Individual/rep. Provider Name				
Provider No.		Street Address				
City		State	Zip Code			
Day time Phone Evening Phone Number Number ()		Email Address to b	Email Address to be used for all submittals			
MA A/B License nos.		MA C/D License no	MA C/D License nos.			
Out-of-State License nos.		Out-of-State Licer	Out-of-State License nos.			
4. List existing instructors						
Name Prima		phone number	MA license type and No.			

Pursuant to 237 CMR 17.02, inclusive, I hereby apply for approval from the Board of State Examiners of Electricians to offer courses in accordance with the requirements for licensure renewal pursuant to 237 CMR 17.00. I fully understand that failure to abide by the above requirements, failure to comply with 237 CMR, and to abide by any other Board requirements shall be grounds for the Board to initiate formal adjudicatory proceedings which may result in the suspension or revocation of any licenses held by involved individuals, and rights and privileges associated with this approval as a provider, along with any other discipline allowed by law. This institution agrees to abide by all Board Regulations and attest that all statements made herein are accurate and true. This application is signed under the pains and penalties of perjury.							
Representative/applicant Signature		Date					

Entities who are partnered with a MA licensee or Provider should complete this agreement:

In connection with an application to renew MCE provider status in furtherance of the Massachusetts Board of State Examiners of Electricians' (hereinafter 'the Board) Mandatory Continuing Education (MCE) requirements as established in 237 CMR 17.01 and 17.02

1. 1	This Agreement is by and between	(Print Name of	Licensee)	and			
		to act in acc	ordance with the requir	rements			
(Name of entity/School)						
of an	application for Continuing Education Provi	der (CEP).					
Board's	partnered providership we agree to undert Mandatory Continuing Education (MCE) as the following:						
II.	To maintain current license(s) in good st	anding with the MA Boa	rd.				
III.	To maintain accurate records of MCE cor	npletion for the duratio	n required by regulation	١.			
IV.	To issue Board standard certificates only to attendees who have completed the MCE requirement.						
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M	requirement.	a and accuracy materials :	with the Deemd				
VI. VII.	To maintain current Provider information and course materials with the Board.						
۷11.	Misuse of Provider status may be grounds for the Massachusetts Board of State Examiners of Electricians to initiate formal disciplinary action against the providership and if						
	deemed necessary associated license(s)		•	51			
VIII.	To attend any Provider seminar or meeti		55. 1 C1 M.O.L. C. 112 5 0	/ I •			
IX.	To notify the Board of all instructors associated with this Providership and hold their						
	licenses in good standing.						
Х.		To maintain the security of records kept in association with the Providership.					
XI.	That the Commonwealth may recover and be compensated for any expenses because of						
	errors and omissions made by the entity	or on behalf of the ent	ity.				
XII.	XII. That failure to meet the requirements and standards will result in the removal of						
	Providership approval status.						
_	Signature of MA licensee/instructor		Date				
-	Signature of entity representative		Date				

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