

Check type of license you are

applying for:

Last Name

State of New Hampshire

OFFICE OF PROFESSIONAL LICENSURE & CERTIFICATION

DIVISION OF LICENSING AND BOARD ADMINISTRATION

Advisory Board of Reflexology, Structural Integration, and Asian Bodywork Therapy

> 7 Eagle Square, Concord NH 03301 (603) 271-2152

Bodywork Licensure Application

Reflexology

Structural Integration

Asian Body work Therapy

First Name

PLEASE PRINT

J	For Dep				
	☐ \$110.00 Fee/Check #				
	Effective De	4094			
		Effective Dates:			
License Number:					
			Middle In		
			i		
1	lail Address				
	ian Addicas				
	ian Addits				
	ian Additis	State	Zip		
	ian Additis	State	Zip		
	Phone Numb		Zip		
		er			
			Zip		

Home Mailing Address (Street/PO Box)	City	State Zip
	1	
Name of Business Where Currently Working	Business Phor	ne Number
Business Address (Street/PO Box)	City	State Zip
	1	1 1
e you been convicted of any crime involving vio		
on, or any sexually-related crime? 🗌 No 🛛	Yes (If yes, please ex	xplain on a separate sheet of p

"By my signature I attest full compliance with RSA 328-H and all corresponding New Hampshire regulations and that the information and documentation provided are accurate to the best of my knowledge. I understand that knowingly providing false information may be grounds for denial, suspension, and or revocation of a license."

Date Signature

IMPORTANT: Below is a list of the documentation you will need to attach to this application. If you have any questions while completing this application, please do not hesitate to call our office at 603-271-2152 for assistance. Mail or deliver application and materials to the address on the front of this application.

1. A recent photograph of yourself - 2x2 passport photo.

Social Security Number:

- 2. Application fee is \$110. Checks or money order(s) are to be made payable to: "Treasurer, State of New Hampshire."
- 3. Proof of current certification from respective national certifying agency in accordance with RSA 328-H:2, VII.

DEAR APPLICANT,

YOUR APPLICATION FOR A BODYWORK LICENSE IS INCOMPLETE, AND THEREFORE, CANNOT BE ACCEPTED AT THIS TIME. BELOW ARE THE REQUIREMENTS FOR SUBMITTING YOUR APPLICATION. THE REASON(S) FOR RETURNING YOUR APPLICATION ARE MARKED BELOW. IF YOU HAVE ANY QUESTIONS, PLEASE DO NOT HESITATE TO CALL THIS OFFICE AT 603-271-2152.

(F) ==	
	A recent photograph of yourself - 2x2 passport photo.
	Application fee is \$110. Checks or money order(s) are to be made payable to: "Treasurer, State of New Hampshire.
	Proof of current certification from respective national certifying agency in accordance with RSA 328-H:2, VII:
	American Reflexology Certification Board; or
	International Association of Structural Integrators or the Rolf Institute; or
	Diplomate in Asian bodywork therapy from the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM).
I 4	
\equiv	
-	
7	

OPTIONAL INFORMATIONAL QUESTION

REGARDING MILITARY EXPERIENCE AND/OR RELATIONSHIP TO MILITARY PERSONNEL TRANSFERRED TO NEW HAMPSHIRE

Dear Applicant,

Pursuant to New Hampshire RSA 332-G:7, each board supported by the New Hampshire Office of Professional Licensure and Certification (OPLC) shall:

 "upon presentation of satisfactory evidence with an application for licensure, certification, or registration, accept education, training, or service completed by an individual as a member of the armed forces, as defined in RSA 21:50, II, toward the qualifications required to receive the license, certificate, or registration in question."

RSA 21:50, II - "Armed forces" means the United States Army, Army Reserve, Navy, Naval Reserve, Marine Corps, Marine Corps Reserve, Air Force, Air Force Reserve, Coast Guard, Coast Guard Reserve, Army National Guard, and the Air National Guard. "Armed forces" also includes other components, but is limited to those components and active duty periods described in 38 C.F.R. 3.7.

OR

2. "Notwithstanding any general or special law to the contrary, each of the boards or commissions under this title authorized to conduct licensure, certification, or registration, and examinations therefor, shall upon the presentation of satisfactory evidence by an applicant before the board or commission, facilitate the issuance of a license or certification for a person: (i) who is certified or licensed in a state other than New Hampshire; (ii) whose spouse is a member of the armed forces in the United States; (iii) whose spouse is the subject of a military transfer to New Hampshire; and (iv) who left employment to accompany a spouse to New Hampshire. The procedure shall include, but not be limited to, facilitating the issuance of a license, certificate, or registration if, in the opinion of the board or commission, the requirements for licensure, certification, or registration of such other state are substantially equivalent to the requirements for licensure, certification, or registration in New Hampshire."

Please place a check mark in all that apply below:

I <u>am</u> eligible for consideration as defined in paragraph #1 above.
I am not eligible for consideration as defined in paragraph #1 above
I <u>am</u> eligible for consideration as defined in paragraph #2 above.
I am not eligible for consideration as defined in paragraph #2 above