

**Office of Professional Licensing and Certification
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By my signature, I certify that the information and documentation provided are true, complete, and not misleading to the best of my knowledge and belief. I understand that providing information that is false, incomplete, or misleading constitutes grounds for denial, suspension, or revocation of a certificate and potentially subjects me to prosecution under RSA 641 relative to falsification in official matters.

Applicant's Signature: _____

Date Signed: _____