State of New Hampshire

OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION

121 South Fruit Street Concord, N.H. 03301-2412 Telephone 603-271-2152 · Fax 603-271-6702

LINDSEY B. COURTNEY
Interim Executive Director



Application for Emergency License Pursuant to Executive Order #15

1.	Name:					
	Last	First	Middle	Maiden / Other names used		
2.	Home Address:					
	Street		City or Town	State Zip Code		
3.	Phone: ()	Social Security # (required)	Em	ail		
	Date of Birth (DOB)					
4.	•	disciplinary action against any proreprimand, probation, suspensionader? No		-	,,	
lice	What state(s) do you ho	Syou answered Yes to question 4, you also an active professional certification are state license that is active and in on from your original state of licen	on, license or registration good standing must be	on? List state(s) below. To be submitted. Verification may		
une	derstand knowingly provi	e that the information provided is ac ding false information may be grou ands for conviction of a misdemean	inds for denial, probation		evocation	
				/ /		
Full Signature of Applicant			Da	Date		

Submit application and license verification via fax, mail, or email to the following:

Office of Professional Licensure and Certification Attn: Emergency Licensing 121 South Fruit Street Concord, N.H. 03301-2412 Telephone 603-271-2152 Fax 603-271-6702

Email: OPLCLicensing@oplc.nh.gov