

N.H. Department of Health & Human Services  
**Application for Renewal - Electrologist**

INSTRUCTIONS: In order to maintain your electrology license, please complete this application in full and submit to: **Christine Topham, Department of Health & Human Services, Office of Operations Support, 129 Pleasant Street, Brown Building, Concord, NH 03301.** The application must be accompanied by a check or money order in the amount of \$100.00 for the renewal fee, made payable to: Treasurer, State of New Hampshire. Applications are due no later than June 1 2008. All questions can be directed to Christine Topham at the address above or at 1-800-852-3345 ext. 5127 or 603-271-5127.

PERSONAL/BUSINESS INFORMATION					
Last Name	First Name	Middle Initial	Home Phone	License #	Expiration Date
Home Address		City	State	Zip Code	

Business Address (1)			
City	State	Zip Code	Business Phone
<b>Check One:</b> <input type="checkbox"/> Owner <input type="checkbox"/> Employee <input type="checkbox"/> Subletting Space in Existing Electrology Office			

Business Address (2)			
City	State	Zip Code	Business Phone
<b>Check One:</b> <input type="checkbox"/> Owner <input type="checkbox"/> Employee <input type="checkbox"/> Subletting Space in Existing Electrology Office			

CONTINUING EDUCATION - List below your continuing education courses, events and activities.							
Course/Event/Activity	Location	Name, Address & Phone of Presenter/Sponsor	Begin Date	End Date	Number of Hours		
					Live	Infection Control	Home Study

Are you licensed or registered in any other state?  Yes  No.  
 If yes, which state(s)? \_\_\_\_\_

Have you ever had any disciplinary action taken against your license/registration(s)?  Yes  No.  
 If yes, please explain: \_\_\_\_\_

I certify that the above information is true and accurate, and I understand that documentation of evidence of continuing education is to be made available to the Department of Health and Human Services upon request.

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 (Date Signed)

FOR DEPARTMENT USE ONLY	
<input type="checkbox"/> \$100 Fee/Check # _____	Date Received _____
Effective Dates: _____	
License Number: _____	