



New Jersey Office of the Attorney General

Division of Consumer Affairs
State Board of Examiners of Heating, Ventilating,
Air Conditioning and Refrigeration (HVACR) Contractors
124 Halsey Street, 6th Floor, P.O. Box 47031
Newark, New Jersey 07101
(973) 504-6420

**Application for Continuing Education
Instructor/Course Approval
To Be Completed Prior to July 1, 2020**

Information that you provide on this application may be subject to public disclosure as required by the Open Public Records Act (OPRA).

Date: _____

Information for website:

Name of Instructor: _____
Last name First name Middle name

Address: _____
Street address City State ZIP code

Home telephone number: _____ Cellular number: _____
(include area code) (include area code)

New Jersey Licensed HVACR Contractor Number: _____
(If applicable)

Email address: _____

Instructor Number (for previously approved instructors): _____

Attach the following:

1. Resume/Curriculum vitae
2. Course outline/syllabus
3. Non-refundable check or money order in the amount of \$100.00 made payable to:
"State of New Jersey"

Mail all items to the P.O. Box listed above. New Instructors will be scheduled to appear before the Board after all items have been received.

Previously approved instructors will be scgeduled to appear before the Board only if the Board has follow-up questions after review of all items.

Please refer to the information concerning HVACR continuing education which was published in the New Jersey Register on August 6, 2018 for the required topics.