



Rhode Island Department of Labor and Training
 Division of Workforce Regulation and Safety
 Professional Regulation
 Hoisting Engineers
 1511 Pontiac Avenue, Building 70-2
 Cranston, RI 02920-0943
 (401) 462-8554
<http://www.dlt.ri.gov/profregs/HoistMain.htm>



“Safety Through Training”

OPERATOR TRAINEE LICENSE APPLICATION

PLEASE PRINT INFORMATION CLEARLY

INSTRUCTIONS: Please complete application and submit the following items to the address listed above:

1. One (1) passport photos;
2. A check or money order in the amount of \$75.00 payable to RIDLT (*Application fee is non-refundable*);
3. A notarized letter from the company authorizing the use of equipment to be used by the trainee; and
4. A notarized letter from the proposed trainer indicating his/her hoisting engineer’s license number and possesses the required experience and knowledge to train in accordance with *Rule 14 of the Rules and Regulations of the Board of Hoisting Engineers Examiners*.

Application must be signed and notarized. Failure to complete application or not provide the required documents *will* delay processing.

APPLICANT INFORMATION

| | | | |
|--------------------------|---------------|----------------|----------|
| Social Security Number | Date of Birth | | |
| Last Name | First Name | Middle Initial | |
| Street | City/Town | State | Zip Code |
| Primary Telephone Number | Email Address | | |

FOR OFFICE USE ONLY

| | |
|--------------------------|-------------------------------------|
| \$ _____ Amount Paid | _____ Division Approval for Test |
| _____ Date of Payment | _____ Date Approved |
| Comments: _____ | |

EMPLOYER INFORMATION

Company Name

Street

City/Town

State

Zip Code

Telephone Number

WORK HISTORY

Name of Employer

From/To

Type of Work

EDUCATION

List all education and schooling that you have received in the hoisting engineer trade

Location

From/To

Degree/Diploma

List all trade licenses you hold with the Department of Labor and Training *and* all out of state licenses

Type of License

License Number

State Issued

Type of License

License Number

State Issued

Type of License

License Number

State Issued

I certify that all information contained herein is true to the best of my knowledge

Applicant's Signature

Date

Notary Public's Signature

Date