

STATE OF MAINE

BOARD OF
CHIROPRACTIC LICENSURE

APPLICATION FOR

CHIROPRACTIC ACUPUNCTURE



Department of Professional and Financial Regulation

Office of Licensing and Registration

35 State House Station
Augusta, ME 04333-0035

Office Telephone: (207) 624-8600 or (207) 624-8620
HEARING IMPAIRED (207) 624-8563
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Last Revised: 5/2000

APPLICATION INSTRUCTIONS
CHIROPRACTOR CERTIFICATE TO PRACTICE ACUPUNCTURE

Please be sure to refer to 32 M.R.S.A. Section 451(1-A) and Chapter 9 for information regarding chiropractic acupuncture.

CHECK LIST OF THINGS TO DO:

- Complete the application
- No fees are required**
- A copy of chiropractic acupuncture education credentials



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ANGUS S. KING, JR.
 GOVERNOR

ANNE L. HEAD
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Chiropractic Acupuncture
 Statement of Practice

The Board of Chiropractic Licensure may certify currently licensed chiropractors to practice acupuncture who demonstrate that he or she has engaged in the practice of acupuncture to the satisfaction of the board, prior to April 30, 1999. *Applicants approved for certification must comply with all of the certification requirements that may be required by board rules within two (2) years from the adoption of the rules.* Once finalized, a copy of these rules will be sent to you.

EDUCATION INFORMATION REQUIRED: To verify your chiropractic acupuncture education, please submit a copy of your chiropractic acupuncture education credentials together with this application.

Name:		
Mailing Address:		
City:	State:	Zip Code:
County:	Telephone #: (____) _____ - _____	
Social Security #: (____)-(____)-(____)		Date of Birth: _____
Business Name:		
Business Address: (if different from mailing address)		
City:	State:	Zip Code:
County:	Telephone #: (____) _____ - _____	