



**Massachusetts Vehicle Check  
OBD Diagnostics and Repair  
Training Application**  
787-A Hartford Turnpike, Shrewsbury, MA 01545

Please complete **ALL** sections of this form in **INK** and mail to Massachusetts Vehicle Check at the address above, or email to [OBDDRTraining@MAVehicleCheck.com](mailto:OBDDRTraining@MAVehicleCheck.com) (508) 452-8520



<b>SECTION A Applicant Information <u>PLEASE PRINT CLEARLY</u></b>		
1. Applicant Name:	First	Middle Last
2. Driver's License Number:		
7. Home Address:		
8. City:	9. Zip Code:	10. State:
11. Cell Phone:	12. Shop Phone:	
13. Shop Name/Address:		
14. E-Mail Address: _____@_____		
Note: Opus will only use this e-mail address to send you reminders about upcoming Registered Emissions Repair Technician (RERT) Ongoing Training classes; it will not be shared with any third party without your permission.		

**SECTION B OBD Diagnostics and Repair Training**

**Shrewsbury MAC 787A Hartford Trpk. Shrewsbury, MA. 01545**

Tuesday - Friday, May 21-24 2024 8:00 AM - 5:00 PM Classroom/Hands On Training

I understand that there is a maximum of 10 technicians per class, that registration priority will be given to applicants on a first come, first served basis. I also understand that if fewer than five (5) repair technicians enroll by the week before a class begins, the class may be canceled. I agree to notify Massachusetts Vehicle Check with at least one week's notice if I cannot attend the requested training.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date