OHIO OPTICAL DISPENSERS BOARD

77 SOUTH HIGH ST. 16TH FLOOR
COLUMBUS, OHIO 43215-6108
(614) 466-9709 FAX (614) 995-5392
WWW.OPTICAL.OHIO.GOV
Email: odb@odb.ohio.gov

REMOVAL OF APPRENTICE FROM SUPERVISION

A separate form is required for each apprentice being removed from supervision.

I will no longer supervise the education and training of the following apprentice:

_____
Please Print **Apprentice Name** **Apprentice Registration Number**

The last day of supervised education and training was:_____
DATE

Signature of Licensed Optician_____

_____
Please Print **Licensed Optician's Name** **License Number**

Home Address of Supervisor

_____

City, State, Zip_____

Is this a change of address? ☐**Yes** ☐**Home** ☐ **Work** ☐**No**

Home Phone # (_____)_____

Employer Name_____

Employer Address_____

City, State, Zip_____

Work # (_____)_____

Please mail to the address above or Fax to 614 995-5392.

ODB 0103 09/08