State of Arizona
Board of Chiropractic Examiners

1951 W. Camelback Rd. Suite 330 • Phoenix, Arizona 85015
Phone (602) 864-5088 • FAX (602) 864-5099
www.chiroboard.az.gov

Reinstatement Requirements

The Application for Reinstatement follows. Please review the following instructions before you complete and submit the application.

Reinstatement of License from Administrative Suspension Instructions:

- Answer all questions on the application.
- Have your signature notarized.
- Have verifications of licensure in good standing sent directly from all jurisdictions in which you hold of have held a license.
- Provide documentation of having completed 12 hours of qualifying continuing education for each year of suspension.
- Complete the “Statement of Citizenship and Alien Status for State Public Benefits” form and attach a copy of the appropriate document from the enclosed "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" list.
- Do not enclose any money. Once the Board approves your reinstatement application, you will be notified of the amount required for reinstatement of your license.

Reinstatement from Retired Status Instructions:

- Answer all questions on the application.
- Have your signature notarized.
- Have verifications of licensure in good standing sent directly from all jurisdictions in which you hold of have held a license.
- Provide documentation of having completed 12 hours of qualifying continuing education if your license has been on retirement status for less than one year and 24 hours of qualifying continuing education if your license has been on retirement status for one or more years
- Provide documentation of successful completion of the SPEC examination. Your transcript must be sent directly from NBCE.
- Complete the enclosed “Statement of Citizenship and Alien Status for State Public Benefits” form and attach a copy of the appropriate document from the enclosed "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" list.
- Do not enclose any money. Once the Board approves your reinstatement application, you will be notified of the amount required for reinstatement of your license.

Please contact our office if you have any questions.

State of Arizona
Board of Chiropractic Examiners

1951 W. Camelback Rd. Suite 330 • Phoenix, Arizona 85015
Phone (602) 864-5088 • FAX (602) 864-5099
www.chiroboard.az.gov

Application for Reinstatement of License

Instructions: Type or print in blue or black ink. Answer ALL questions. Answer "None" or "N/A if it is the correct response.

1. Name:_____
   Last First M.I.

2. License No.:_____ PMMTP No.:_____ Acupuncture No.:_____

3. Social Security No.:_____

4. Year license was last active:_____

5. Clinic Name:_____Clinic Owner:_____

   Clinic Owner's Profession:_____

   Address: _____
   Street

   _____
   City State Zip Code

   Telephone: (_____)_____ Fax: (_____)_____

6. Home: _____
   Street

   _____
   City State Zip Code

   Telephone: (_____)_____

7. List all states or jurisdictions in which you are or have been licensed to practice chiropractic. For each, provide verification of good standing, submitted directly from the issuing state.

   _____/ _____/ _____ / _____

8. List any other healthcare profession you are or have been licensed or certified to practice and the state or jurisdiction in which you hold the license or certification. For each, provide verification of good standing, submitted directly from the issuing state.

_____ / _____ / _____ / _____

9. Are you under investigation by any licensing Board? ☐ Yes ☐ No

10. Since your last renewal, has any formal sanction been taken against your license in any state in which you are or have been licensed? If yes, provide the Board with a written explanation and copy of the disciplinary action. The copy must be sent directly from the issuing agency.

☐ Yes ☐ No

11. In the last 12 months, have you been arrested, charged with, indicted for, or under investigation for a misdemeanor or felony, requiring resolution in the courts? If yes, provide the Board with a written explanation and copy of the police report. The copy must be sent directly from the issuing agency.

☐ Yes ☐ No

12. Since you last applied for renewal of your license, have you entered into a plea agreement or been convicted of a misdemeanor or felony? If yes, provide the Board with a written explanation and copies of the police report and court record of the conviction. The copies must be sent directly from each issuing agency.

☐ Yes ☐ No

13. Attach documentation of completion of the required continuing education pursuant to ARS 32-931.

I, the undersigned, do hereby attest that the facts, statements, and answers given by me herein are true and correct and I am not omitting any information which may be of value to the Board of Chiropractic Examiners in determining my qualifications, whether it is called for or not.

_____ _____

Applicant's Signature Date

State of _____

County_____

Subscribed and sworn before me this _____day of _____, _____

Notary Signature _____

My commission expires_____

ARIZONA STATEMENT OF CITIZENSHIP
OR ALIEN STATUS FOR STATE PUBLIC BENEFITS
Professional License and Commercial License
Arizona State Board of Chiropractic Examiners

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I – APPLICANT INFORMATION

APPLICANT'S NAME (Print or type) _____

TYPE OF APPLICATION (Check one) ☐ INITIAL APPLICATION ☐ RENEWAL

TYPE OF LICENSE/REGISTRATION (Check one) ☐ CHIROPRACTIC ☐ BUSINESS ENTITY

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States? ☐ Yes ☐ No

If **Yes**, indicate place of birth:

City _____ State (or equivalent) _____ Country or Territory_____

If you answered **Yes**, 1) Attach a legible copy of a document from the attached list.
Name of document _____
2) Go to Section IV.

If you answered **No**, you must complete Section III and IV.

SECTION III – ALIEN STATUS DECLARATION

To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status. Name of document provided _____

Qualified Alien Status (8 U.S.C.§§ 1621(a)(1),-1641(b) and (c))

☐ 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)

- ☐ 2. An alien who is granted asylum under Section 208 of the INA.
- ☐ 3. A refugee admitted to the United States under Section 207 of the INA.
- ☐ 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- ☐ 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- ☐ 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- ☐ 7. An alien who is a Cuban/Haitian entrant.
- ☐ 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States.

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- ☐ 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

Alien Paroled into the United States For Less Than One Year (8 U.S.C. § 1621(a)(3))

- ☐ 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C)

- ☐ 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- ☐ 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 *et seq.*];
- ☐ 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present

- ☐ 14. A person not described in categories 1-13 who is otherwise lawfully present in the United States. **PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).**

SECTION IV - DECLARATION

All applicants must complete this section.

I declare under penalty of perjury under the laws of the state of Arizona that the answers and evidence I have given are true and correct to the best of my knowledge.

APPLICANT'S SIGNATURE

TODAY'S DATE

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification license.

2. A driver license issued by a state that verifies lawful presence in the United States.

3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)

4. A United States certificate of birth abroad.

5. A United States passport. ***Passport must be signed***

6. A foreign passport with a United States visa.

7. An I-94 form with a photograph.

8. A United States citizenship and immigration services employment authorization document or refugee travel document.

9. A United States certificate of naturalization.

10. A United States certificate of citizenship.

11. A tribal certificate of Indian blood.

12. A tribal or bureau of Indian affairs affidavit of birth.

13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

Revised 8.2012

State of Arizona
Board of Chiropractic Examiners

1951 West Camelback Road, Suite 330 • Phoenix, Arizona 85015
Phone (602) 864-5088 • FAX (602) 864-5099
www.chiroboard.az.gov

Verification of Licensure in Good Standing

(Please print in blue or black ink)

Name:_____
Last First M.I.

The person listed above is applying for the following:

- ❑ **Arizona Licensure by Examination**
- ❑ **Arizona Licensure by Reciprocity** *(verification of licensure by examination required by reciprocity state)*
- ❑ **Reinstatement of Arizona License**
- ❑ **Reinstatement of Retired Arizona License**

The State of Arizona Board of Chiropractic Examiners requests that this form be completed by each jurisdiction in which the above referenced applicant holds or has held a license. Please complete this form and return it to the above address.

Name of Licensee:_____

State: _____ License Number:_____

Date Issued:_____ By Examination:_____ By Reciprocity/Waiver:_____

If licensed by examination, which exams were accepted for licensure?

❑ NBCE I-IV ❑ NBCE I-III ❑ SPEC ❑ State Exam ❑ Other:_____

Is license current? ❑ Yes ❑ No If no, date expired:_____

Has any disciplinary action been taken against this doctor's license? ❑ Yes ❑ No
If yes, please attach a certified copy of the Board Order(s).

Are there any pending complaints or open investigations against this doctor's license? ❑ Yes ❑ No
If yes, please provide this office with any available documents relating to the complaint or investigation. These will be used for our investigative purposes only.

STATE SEAL

Signed:_____
Title:_____
State Board:_____

License Reinstatement Rules

§32-923. <u>Change of address; annual renewal fee; failure to renew; waivers</u>

A. Every person licensed pursuant to this chapter shall notify the board in writing of any change in residence or office address and telephone number within thirty days after that change. The board shall impose a penalty of fifty dollars on a licensee who does not notify the board as required by this subsection.

B. Except as provided in section 32-4301, every person licensed to practice chiropractic in this state shall annually make a renewal application to the board before January 1 after original issuance of a license and shall pay a renewal license fee prescribed by the board of not more than one hundred seventy dollars. The renewal application shall be made on a form and in a manner prescribed by the board. At least thirty days before the renewal application and renewal fee are due, the board shall send by first class mail a renewal application and notice requiring license renewal and payment of the renewal fee.

C. The board shall automatically suspend a license if the licensee does not submit a complete application for renewal and pay the renewal license fee as required by this section.

D. The board may reinstate a license if the person completes an application for reinstatement as prescribed by the board, complies with the continuing education requirements for each year that the license was suspended, pays the annual renewal license fee for each year that the license was suspended and pays an additional fee of one hundred dollars. An applicant who does not request reinstatement within two years of the date of suspension shall apply for a license as a new candidate pursuant to section 32-921 or 32-922.01.

E. The board may waive the annual renewal license fee if a licensee presents evidence satisfactory to the board that the licensee has permanently retired from the practice of chiropractic and has paid all fees required by this chapter before the waiver.

F. During the period of waiver the retired licensee shall not engage in the practice of chiropractic. A violation of this subsection subjects the retired licensee to the same penalties as are imposed in this chapter on a person who practices chiropractic without a license.

G. The board may reinstate a retired licensee to active practice on payment of the annual renewal license fee and presentation of evidence satisfactory to the board that the retired licensee is professionally able to engage in the practice of chiropractic and still possesses the professional knowledge required. After a hearing, the board may

refuse to reinstate a retired licensee to active practice under this subsection on any of the grounds prescribed in section 32-924.

R4-7-503. <u>Renewal License: Issuance, Reinstatement</u>

A. At least 30 days before a renewal application and renewal fee are due, the Executive Director of the Board shall send by first class mail to a licensee at the licensee's address of record, a renewal application and notice.

B. The licensee renewal application shall be returned to the Board office on a business day. The date of receipt shall be the postmarked date or the date the licensee hand delivers the license renewal application.

C. To complete a license renewal application, a licensee shall provide the following information and documentation:

1. The licensee's full name;

2. The licensee's current home and office addresses, current home and all office phone numbers, and all current office fax numbers;

3. The name and professional designation of the owner or owners of the clinic or office at which the licensee is employed;

4. The licensee's number;

5. A record of any professional disciplinary investigation or sanction taken against the licensee by a licensing board since the licensee last applied for renewal of a license in this or any other state;

6. A record of any arrest, indictment or charge or any conviction or plea agreement for a misdemeanor or felony since the licensee last applied for renewal of the license;

7. The renewal fee of $170.00 required by A.R.S. § 32-923;

8. Attestation of compliance with the continuing education requirements under A.R.S. § 32-931 and A.A.C. R4-7-801. The licensee shall attest to compliance with continuing education requirements by documenting, on the renewal form, the date or dates the continuing education course was attended, the number of hours of continuing education completed, the qualifying course topic or topics, and the name of the accredited college or university with whom the course instructor is affiliated with as faculty. If the course does not meet the requirements under A.R.S. § 32-931 and R4-7-801, but has been approved by the

Board, the applicant shall provide the continuing education course approval number issued by the Board instead of the name of the affiliated college or university.

9. The licensee's signature attesting to the truthfulness of the information provided by the licensee.

D. In accordance with A.R.S. § 32-923(C), the Board shall automatically suspend a license if the licensee does not submit a completed application for renewal before January 1 of each calendar year. The Board shall send written notice of the license suspension to the licensee on or before January 20.

E. The Board shall reinstate a suspended license if the licensee pays the annual license renewal fee, pays an additional fee of $100 as required by A.R.S. § 32-923(D), and submits a completed license renewal application between January 1, and March 31 of the calendar year for which the license renewal is made.

F. On or after April 1 of the calendar year for which a license renewal application was to be made, an individual who wishes to have a suspended license reinstated shall apply for reinstatement in accordance with A.R.S. § 32-923(D).

G. An application for reinstatement of license may be obtained at the Board office on business days or by requesting that the Board mail one to an address specified by the applicant.

H. A completed application for reinstatement of a license shall be submitted to the Board office on a business day. The Board shall deem an application for reinstatement of a license received on the date that the Board stamps on the application as the date it is delivered to the Board office.

I. To complete an application for reinstatement of license, an applicant shall provide the following information and documentation:

1. The applicant's full current name, suspended license number, and certification number if a specialty certification was held by the licensee;

2. The applicant's current home and all office addresses, current home and all office phone numbers, and all current office fax numbers;

3. The name and professional designation of the owner or owners of the office or clinic at which the applicant will be employed;

4. The applicant's Social Security number;

5. A list of all other states or jurisdictions in which the applicant is or has been licensed or certified to practice chiropractic or any other health care profession with a verification of good standing for each current license or certification submitted directly by the licensing agency of the other states or jurisdictions;

6. A list of required continuing education courses completed and certification of course completion;

7. A record of any professional disciplinary investigation or sanction initiated since the applicant last applied to renew the license;

8. A record of any arrest, indictment or charge or any conviction or plea agreement for a misdemeanor or a felony since the date of the applicant's last application for licensure;

9. The applicant's notarized signature attesting to the truthfulness of the information provided by the applicant.

J. The Board shall process a license reinstatement application in accordance with R4-7-502 (D) through (J). The Board shall deem the application received on the date that the Board stamps on the application as the date the application is delivered to the Board Office.

K. The Board shall reinstate or renew a license if:

1. The applicant or licensee has complied with the requirements of this Chapter and A.R.S. § 32-900 et seq.

2. The applicant or licensee has not had any professional disciplinary sanction taken against the applicant's or licensee's license by a licensing board since the last application for licensure;

3. The applicant or licensee has not been convicted of, pled guilty to, or pled nolo contendere to a misdemeanor or a felony since the last application for licensure.

L. If the provisions of subsection (K) are satisfied, the Board shall issue a license renewal certificate on or before February 1, of each year. The license renewal certificate shall serve as notice that the renewal application is complete and approved.

M. If there is reason to believe that the provisions of subsection (K) have not been satisfied or that possible grounds for denying the renewal or reinstatement application

exist, the Board shall notify the applicant of this possibility within 25 business days of the date that the application is received at the Board office.

N. An applicant who is so notified that renewal or reinstatement may be denied may provide a written response and shall submit any documentation as required through written notice by the Board within 60 calendar days from the date of the Board's notice. An applicant who is unable to supply the required documentation within 60 calendar days may submit a written request to the Board for an extension of time in which to provide the required documentation. The request for an extension of time shall be submitted to the Board office before the 60-day deadline for submission of the required documentation, and shall state the reason that the applicant is unable to comply with the 60-day requirement and the amount of additional time requested. The Board shall grant a request for an extension of time if the Board finds that the reason the applicant was unable to comply with the 60-day requirement was due to circumstances beyond the applicant's control and that compliance can reasonably be expected to be remedied during the extension of time.

O. If an applicant fails to submit required documentation within the time permitted, the Board shall issue a notice of intent to deny the renewal application or reinstatement application.

P. The Board shall make a licensing decision no later than 70 business days after receiving all required documentation as specified in subsection (N). The Board shall deem required documentation received on the date that the Board stamps on the documentation as the date the documentation is delivered to the Board's office.

Q. For the purpose of A.R.S. § 41-1073, the Board establishes the following time-frames for renewal licenses or reinstatement of licenses:

1. Administrative completeness review time-frame: 25 business days.

2. Substantive review time-frame: 70 business days.

3. Overall time-frame: 95 business days.