

LICENSURE/PRACTICE

8. List all state(s) in which you now hold, or have ever held, a license: _____
Arrange for a verification of licensure from each state to be sent directly to the Board office from each state.

DISCLOSURES - All applicants must answer the following two questions.

- 9. Have you ever been convicted of or entered a plea of guilty or *nolo contendere* (no contest) to any felony, misdemeanor or any other criminal offense, including any offense for which you have received a pardon, in any jurisdiction? Yes No **If yes, submit a certified copy of your criminal history record.**
- 10. Has your license ever been revoked or suspended or other disciplinary action taken or pending or your application for license or registration been refused, revoked or suspended by the authorities of another state, territory, or country? 24 Del. C. §2616 Yes No **If yes, arrange for the State(s) to send information about the disciplinary action(s) to the Board.**

To assure consideration of your license application at the next Board meeting, the Board office must receive all of these items no later than 4:30 PM ten full working days before the Board's meeting date:

- Completed, signed and notarized application form
- Fee payment
- All required supporting documentation.

Applications that are not complete within six (6) months of filing may be considered abandoned and discarded. The Board office will attempt to notify you before disposing of an abandoned application.

Please note: When your application is complete, please allow 4-8 weeks to receive your license.

AFFIDAVIT

I certify that the information in this application is complete and true. I understand that the intentional inclusion of false or fraudulent information in this application, or the material omission of information which might have a bearing on licensure, may result in the denial of licensure and will be reported to the Attorney General for further action. I understand that the application fee is not refundable.

Signature of Applicant

Printed Name of Applicant

Sworn to and subscribed to before me this _____ day of _____ in the year _____.

NOTARY PUBLIC/Affix Seal

My commission expires: _____
State of _____
County of _____

Refer to dpr.delaware.gov for additional information about application procedures.