

APPLICATION INSTRUCTIONS FOR LICENSURE PEDORTHIST

GENERAL:

All applications are reviewed by the Advisory Committee on Pedorthics which meets three (3) times per year. The Committee makes recommendations to the Board regarding issuance of licenses. The Board issues licenses. The length of time it takes to issue a license depends on when an application is received and when the Committee and Board meet. Applications must be accompanied by the appropriate fee and submitted at least 30 days prior to a Committee meeting. All completed forms and documents should be forwarded to the Board as they become available. Applications completed in the interim between meetings may be presented to the Board Secretary who, upon administrative review, may issue a letter authorizing practice until action is taken by the Board.

An applicant for licensure shall provide the Board with all information required pursuant to the Oklahoma Licensed Pedorthist Act. Any incomplete or missing information, documentation or fees shall render the application incomplete. No license shall be issued unless all application requirements have been met. Incomplete applications will be considered abandoned after one year. Any application fees paid shall not be refunded.

REQUIRED DOCUMENTATION:

APPLICATION: All sections of the on-line application form must be completed.

OTHER LICENSES: Evidence of all current or previously issued licenses or certificates in a medically related field must be verified on **FORM #3**. The applicant is responsible for forwarding a copy of Form #3 to the appropriate state licensing boards and paying any applicable fees.

RECOMMENDATIONS: Two recommendations are required. One must be from a physician licensed in Oklahoma that can attest to the applicant's clinical competence. The second must be from an associate who can affirm the applicant's moral and ethical attributes. All recommendations must be in narrative form. (You may use the Form #4 provided or write a letter.)

OTHER: Foreign applicants must provide written proof of ability to work in the United States as authorized by the United States Immigration and Naturalization Service.

EXAMINATION: Every applicant must have passed all examinations required for certification by the Board of Certification in Pedorthics (BCP). You must submit a copy of your current BCP certificate.

EXTENDED BACKGROUND CHECK: Effective **July 1, 2006** **all** applicants for licensure are required to request an **Extended Background Check (EBC)** by completing the online EBC Authorization Form.

SWORN AFFIDAVIT: If you answer "Yes" to any of the questions (A-O) on the application you must write a statement of explanation, sign it, and have your signature notarized. If you answer "Yes" to any of the questions regarding previous arrests you must additionally submit copies of all police reports/court records. If you have previously obtained an assessment and/or been treated for the use of any drug or chemical substance (including alcohol), please submit copies of the assessment and treatment records.

TEMPORARY LETTER:

A letter authorizing practice under the supervision of a licensed pedorthist may be issued provided **all** requirements for licensure have been met and verified. This permits legal practice during the interim from the time the application is complete and the time at which the Board grants a license. Form #5, Verification of Supervision, must be submitted in order for a letter to be issued.

PRACTICE MAY NOT BEGIN UNTIL A LETTER GRANTING PERMISSION TO PRACTICE IS ISSUED BY THE BOARD SECRETARY OR A FULL LICENSE IS GRANTED BY THE BOARD

RENEWALS:

Licenses are renewed annually by application PRIOR to January 31 for the subsequent year beginning February 1 and ending January 31. A licensee who fails to apply for renewal for one (1) year must reapply for licensure. Every year Podiatrists seeking to renew licensure must obtain 11 continuing education points. No continuing education hours may be carried over from one compliance period to another.

TO FACILITATE THE RENEWAL PROCESS, KEEP THIS OFFICE INFORMED OF YOUR CURRENT MAILING ADDRESS AT ALL TIMES.

FEES: (ALL FEES ARE NON-REFUNDABLE)

LICENSE/PROCESSING FEE (PAYABLE TO OSBMLS)	\$180 (paid on line-do not resubmit)
RENEWAL	\$ 60
LATE RENEWAL (within 30 days of due date)	\$ 90
LATE RENEWAL (after 30 days of due date)	\$120
REINSTATEMENT (after one year)	\$180

I, the undersigned, have read the instructions and understand their content. I swear/affirm the contents of my application are true. The Oklahoma State Board of Medical Licensure and Supervision may verify all information. I have been provided a copy of the Act and Board rules on unprofessional conduct and **have**____/**have not**____ committed any act that would constitute grounds for disciplinary action by the Board under the Act and rules of the Board.

Date

Printed Name

Signature

MAIL THESE SIGNED INSTRUCTIONS WITH ALL REQUIRED FORMS AND DOCUMENTS TO:

**Oklahoma State Board of Medical Licensure and Supervision
P. O. Box 18256
Oklahoma City, OK 73154-0256**

OR BRING TO:

**Oklahoma State Board of Medical Licensure and Supervision
101 NE 51st Street
Oklahoma City, OK 73105**