

**INACTIVE TO ACTIVE LICENSE
STATUS CHANGE**

37M-406 (REV. 1/11)

Please type or print clearly in ink. Be sure to provide all information.

Allow 30 days for your license request to be processed.

<p><i>For Office Use Only:</i></p> <p>Cashiering No.: _____</p> <p>Amt Paid: _____</p>
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VITAL INFORMATION

Legal Name (as it appears on your license) _____

License Number _____ Expiration Date _____

Address of Record _____

City _____ State _____ Zip Code _____

Business Phone _____ Residence Phone _____

Request is hereby made for my license to be changed from an inactive license to an active license. I have completed the continuing education required to activate an inactive license. During the time I had an inactive license, I did not engage in any activity for which an active license is required.

Please initial below

_____ I understand that I must pay the remaining portion of the renewal fee of \$_____ to reactivate my license and that **I must return my inactive license** (fee and license enclosed).

_____ I understand that I must pay the remaining portion of the renewal fee of \$_____ to reactivate my license (fee enclosed). **I am not returning my inactive license** with this request **because** it has been:

Please circle one

LOST

STOLEN

DESTROYED

NEVER RECEIVED

NOTE: The only exception to the requirement of returning your inactive license is if it has been lost, stolen, destroyed or the original was never received. If your license has been mutilated, the document to be replaced must be returned.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. This declaration is executed on the _____ day of _____ 20_____.

Signature _____

<p>FOR OFFICE USE ONLY: Date Ordered: _____ By: _____</p>
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IMPORTANT INFORMATION

When reactivating your license, please remember to return your "INACTIVE" license with this request.

To activate your license, the required **36** hours of CE must have been completed within 2 years prior to the postmarked date of this request.

DO NOT SUBMIT PROOF OF CE WITH THIS REQUEST

A renewal period is defined in the CCR section 1887 as the two-year period which spans from a license's expiration date to the license's next expiration date.

If some or all of the hours used to activate the license are completed in their current renewal period, those hours **CAN** be used for both the activation and for their upcoming renewal.

For activation, the licensee can count CE hours back for two years based on the post-mark date on the activation form. Any CE hours completed in the prior renewal period **CANNOT** be used toward the upcoming renewal.

Example:

John Doe's renewal period is April 1, 2002 through March 31, 2004. He renewed inactive in 2002 and sends his activation request postmarked March 15, 2003. He has 12 CE hours with the completion date of March 25, 2002 and the rest of his hours (24) were completed between April 1, 2002 and March 15, 2003. He has enough hours to activate his license and he has 24 hours of CE already completed for his March 31, 2004 renewal.

You may earn 12 hours of your required CE through self-study courses.

CE must be taken from a BBS approved provider or accredited school.

For additional clarification, please call the board at (916) 574-7830.

NAME CHANGES

You must use your LEGAL name for your professional license. If you have a name change that you would like to have processed with this form, you must submit the only acceptable documentation of either a copy of your marriage certificate, divorce decree or court order. **A driver's license and social security card will NOT be accepted as proof of a legal name change.**

The Board of Behavioral Sciences does not discriminate on the basis of disability in employment or in the admission and access to its programs or activities.

The Executive Officer of the Board has been designated to coordinate and carry out this agency's compliance with the nondiscrimination requirements of Title II of the ADA. Information concerning the provisions of the ADA, and the rights provided hereunder, are available from the ADA Coordinator.