

APPLICATION FOR
**INACTIVE TO ACTIVE
LICENSE STATUS CHANGE**



Instructions and Important Information

Read Carefully Before Completing Your Application

APPLICATION ELIGIBILITY

If you are within four (4) months of your license expiration date, you must renew your license online at www.breeze.ca.gov. Select the option to renew as Active. If you are more than four (4) months away from your license expiration date, follow the instructions below to return your license to Active status (or, for faster processing, you may reactivate your license online at www.breeze.ca.gov).

REQUIRED CONTINUING EDUCATION

To return your license to Active status, you must meet the following continuing education (CE) requirements:

- 18 hours of CE are required if your license will expire **less than one year** from the date of your request for Active status.
- 36 hours of CE are required if your license will expire **more than one year** from the date of your request for Active status.
- If you have not taken a **6-hour Law and Ethics course** during your current renewal period (*the two-year period which spans from your license's expiration date to your license's next expiration date*), that course must be included in the above hours.
- **6-Hour Training in Suicide Risk Assessment and Intervention is required.** This may be completed as CE or via supervised training - see [FAQ](#) for more information.

All CE must have been taken within the two years prior to submission of your *Application for Inactive to Active License Status Change*, and must be taken from a Board-accepted provider.

Note: The Suicide Risk Assessment and Intervention training may have been taken at any time prior to submission of your application. However, in order for it to count toward your 18 or 36 hours of CE, you must take a course from an acceptable provider within the two years prior to submission of this application. See [FAQ](#) for more information.

Do NOT submit proof of CE with your application. You must retain your CE certificates for at least two years from the date of your request for Active status. The Board performs random CE audits. If you are audited, you must provide copies of your CE certificates at that time.

HOW TO APPLY

- Complete the attached application.
- **FEE: Attach a \$100 check or money order** (equivalent to half of the active biennial renewal fee) **payable to “Behavioral Sciences Fund”**:
- **Submit your application and fee to the address below:**

Board of Behavioral Sciences
1625 North Market Blvd., Suite S200
Sacramento CA 95834

TO CONFIRM RECEIPT OF APPLICATION:

To confirm receipt, mail your application using a method that includes tracking. You may also contact your bank to see if your check has been cashed.

ADDRESS CHANGE:

If your address has changed, be sure to update it ASAP online at www.breeze.ca.gov.

APPLICATION PROCESSING TIME

Allow 30 days for processing. Once your request has been approved your active status will appear online at www.breeze.ca.gov, and you will receive confirmation in the mail.

YOUR NEXT LICENSE RENEWAL

Activating your license does not change your license’s expiration date. After your license has been changed to Active status, you must renew your license prior to its usual expiration date, regardless of how soon it occurs.

To renew, you must meet all renewal requirements, including the full renewal fee and 36 hours of CE (including the 6-hour law and ethics course). However, you can count any CE completed for your license activation toward the renewal CE requirement IF those hours were completed during the current renewal period (*the two-year period which spans from your license’s expiration date to your license’s next expiration date*).

QUESTIONS?

Please visit the **Contact Us** link at www.bbs.ca.gov and select an option under “Message the Board.”

APPLICATION FOR
**INACTIVE TO ACTIVE
 LICENSE STATUS CHANGE**



Office Use Only:

Carefully read the "Instructions and Important Information" FIRST

Attach \$100 Fee **Reactivate online at www.breeze.ca.gov for faster processing**
Allow 30 Days for Processing

License Type and Number:	<input type="checkbox"/> LMFT # _____	<input type="checkbox"/> LCSW # _____	Expiration Date:
	<input type="checkbox"/> LPCC # _____	<input type="checkbox"/> LEP # _____	
Legal Name*:	Last	First	Middle

* You must use your legal name. Your "legal name" is the name established legally by your birth certificate, marriage or domestic partnership certificate, or divorce decree (for example). If you have a name change that you would like processed with your application, you must attach the "Notification of Name Change" form and all required documentation. This form is available online at https://www.bbs.ca.gov/pdf/forms/change_name.pdf. Your license will reflect your new name only if a complete "Notification of Name Change" is received with your application. Do not send original documents unless specifically requested.

Mark one: I have completed the required amount of continuing education (CE) necessary to reinstate my license as described in the <i>Instructions and Important Information</i> .	Yes: 18 hours <input type="checkbox"/>
	Yes: 36 hours <input type="checkbox"/>



I have read and understand the attached *Instructions and Important Information*. I hereby request that my license be changed from Inactive status to Active status. I have completed all of 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.

I swear under penalty of perjury under the laws of the State of California that all statements, answers and representations on this form are true, complete and accurate. I understand that providing false information or omitting pertinent information may be grounds for disciplinary action.

Signature of Applicant

Date

