



Physical Therapy Board of California

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY – EDMUND G. BROWN JR., GOVERNOR

Physical Therapy Board of California

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Internet: www.ptbc.ca.gov • facebook.com/PTBCnews • twitter.com/PTBCnews



INACTIVE TO ACTIVE LICENSE STATUS APPLICATION

The law requires that you have a current license issued by the Physical Therapy Board of California (PTBC), in order to practice as a physical therapist or physical therapist assistant in the state of California. Pursuant to section 1399.98(e) of the California Code of Regulations, to restore an inactive license to an active status, the licensee shall do the following:

- Complete continuing education equivalent to that required for a single renewal period of an active license. The continuing competency activity must have been completed within the last two years prior to applying to restore the license to active status. Continuing Competency completed more than two years before the request *cannot* be considered. Visit the PTBC website and read Article 13, Section 1399.90 through 1399.99 of the California Code of Regulations (CCR) for more information about continuing competency requirements.
- Once you complete the required hours of continuing competency activity, please complete this application and mail to the PTBC at 2005 Evergreen St. Suite 1350, Sacramento, CA 95815.

Type of License: Physical Therapist Physical Therapist Assistant

License Expiration Date: _____ **License Number:** _____

Name: _____

Email Address: _____ **Phone Number:** _____

I am requesting to restore my inactive license. By signing below, I certify that I have accumulated at least the minimum continuing competency hours required by section 1399.91 of title 16 of the California code of regulations, within the last two years prior to applying to restore the license to active status. If I am audited by the PTBC, I will submit evidence of my completion of the continuing competency hours.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

Signature: _____ **Date:** _____

NOTE: Please allow 2 weeks for processing. Once your application is processed, your license can be verified at www.ptbc.ca.gov. Restoring your inactive status license does not extend the expiration date of your license. The same expiration date will apply.

To request a duplicate wallet please go to: <http://www.ptbc.ca.gov/forms/chgregst.pdf>

FOR BOARD USE ONLY

License Activation Date: _____ Processed By: _____