

Telephone: (888) 726-9743
(334) 242-4064

Alabama Board of Physical Therapy
Annual License Renewal Form

Fax: (334) 242-3288
email: info@pt.alabama.gov

Instructions: Fill in all required fields. Print. Mail with payment to address at the bottom of the form.

IMPORTANT NOTICE:

Your license will expire at midnight October 1st of the current year. To renew your license, return this form with: certificate(s) of attendance at Board acceptable continuing education (10 hours); and appropriate renewal fee (\$130 PT or \$93 PTA). We do not accept personal checks, cash or credit cards.

After October 31st, the Expired License Renewal fee (\$230 PT or \$193 PTA) and \$50 restoration fee is in effect.

Practicing without a license is a Class C misdemeanor punishable by a fine of not more than \$500, or by a term of imprisonment of not more than 90 days, or both. *ALA. CODE Section 34-24-196 (1975)*

Name:		PTH	PTA
Home Mailing Address		Current Business Address	
_____ Email address		_____ Current Employer	
_____ Street		_____ Street	
_____ City	_____ State	_____ City	_____ State
	_____ Zip		_____ Zip
_____ County		_____ County	
_____ Home telephone number		_____ Business telephone number	_____ Business fax number

(3) Have you ever been convicted of a felony or misdemeanor, entered a plea of nolo contendere, or received deferral adjudication?

YES NO

If you checked YES, give a full explanation using an additional page.

Have you undergone treatment for alcohol or chemical dependency or abuse? YES NO

If yes, identify the date of treatment and nature and circumstances of treatment using an additional page.

Have you treated patients since October 1st? YES NO

Continuing Education Notice:

- Please provide copies of certificates of completion of 10 hours of CE.
- **If initially licensed by Endorsement in 2017, provide certificate of 2 hours of AL Jurisprudence CE.**

(4) I certify the above information is correct and current as of:

Date

Original Signature Required

Daytime telephone number

Mail completed form, CE's, and money order to:

Alabama Board of Physical Therapy
100 North Union Street, Suite 724
Montgomery, AL 36130