

**RENEWAL APPLICATION for 2016-18 to
 Practice Psychology in North Carolina**

*All requested information must be provided below; otherwise,
 application will be returned for completion, and license renewal will be delayed/denied.*

Fee: \$275.00 (\$250.00 renewal fee + \$25.00 late fee)

Required materials & fee must be postmarked by November 30, 2016

TYPE/PRINT NAME AND LICENSE

Name: _____

License No: _____

- See enclosure, "**BIENNIAL LICENSE RENEWAL INSTRUCTIONS**," for further information about completing this form.
- **Supervision Reports ARE required at this time for Licensed Psychological Associates and provisionally Licensed Psychologists.**

COMPLETE RIGHT HAND COLUMN IF INFORMATION ON THE LEFT IS NOT CORRECT OR IS MISSING

[1] Home Mailing Address: →	[1] Street/Box _____ City _____ State _____ ZIP Code _____ County (if in NC) _____
[2] Business Mailing Address: →	[2] Business Name _____ Street/Box _____ City _____ State _____ ZIP Code _____ County (if in NC) _____
[3] Preferred Mailing Address: →	[3] <input type="checkbox"/> Home (H) <input type="checkbox"/> Business (B)
[4] E-mail address: →	[4] _____
[5] Daytime telephone #: →	[5] (____) _____ ext. _____
[6] Are you currently engaged in the practice of psychology? →	[6] <input type="checkbox"/> Yes <input type="checkbox"/> No Complete Item #7 Complete Item #8
[7] Principal setting of primary activity if active in the practice of psychology: →	[7] Check ONLY one. (30) <input type="checkbox"/> State or local governmental (34) <input type="checkbox"/> Private or group practice (31) <input type="checkbox"/> Federal (35) <input type="checkbox"/> Educational institution (32) <input type="checkbox"/> Public school system (36) <input type="checkbox"/> Business/industry (33) <input type="checkbox"/> Non-gov'n't. health care org. (14) <input type="checkbox"/> Other (specify) _____
[8] Most applicable description of present activity if NOT active in the practice of psychology: →	[8] Check ONLY one. (50) <input type="checkbox"/> Working in other field (52) <input type="checkbox"/> Unemployed (51) <input type="checkbox"/> Retired (53) <input type="checkbox"/> Student (14) <input type="checkbox"/> Other (specify) _____

See Page 2: Items #9 and #10 MUST be checked (answered) to renew your license.

[9] Have you--

- a. had a malpractice lawsuit filed against you where a judgment was entered against you or the matter was settled out of court; or
- b. been denied a professional license or permit, or privilege of taking an examination, or had a professional license or permit ever disciplined in any way (e.g., denied, suspended, reprimanded, censured, restricted, limited, placed on probation, revoked, etc.) by any licensing authority in North Carolina (other than the Psychology Board) or any other jurisdiction, or are you aware of any pending charges against a professional license or permit which you hold, or
- c. been convicted of a felony or entered a plea of guilty or *nolo contendere* to any felony charges, or
- d. been convicted of or entered a plea of guilty or *nolo contendere* to any misdemeanor involving moral turpitude, misrepresentation or fraud in dealing with the public, or conduct otherwise relevant to fitness to practice psychology, or a misdemeanor charge reflecting the inability to practice psychology with due regard to the health and safety of clients or patients?

✓ →

- ☐ **Yes (if not previously provided, attach explanation and a copy of judgment/settlement agreement in a civil/administrative matter or certified copy of criminal conviction in a criminal matter, if applicable)**
- ☐ **No**

[10] Continuing Education Attestation:

✓ →

- ☐ **Yes**

I attest that I completed a minimum of 18 continuing education hours during the biennial renewal period from October 1, 2014 to October 1, 2016, as required by Rule .2104 of Title 21, Chapter 54 of the North Carolina Administrative Code. **Included in these hours**, I completed a minimum of 3 hours in the area of ethical and legal issues in the professional practice of psychology which meet Category A requirements. See separate sheet titled, *Biennial License Renewal Continuing Education Guide*, for further information.

- ☐ **Yes, BUT I did not complete the hours within the required time period from October 1, 2014 to October 1, 2016. My hours were completed from October 1, 2014 to _____, insert date -- mm/dd/2016**
- ☐ **No, I received my first license (at any level) from the NC Psychology Board *on or after* October 1, 2014.**

Note: "Yes" *must* be checked in order to renew your license for the 2016-2018 biennium (*unless your initial date of licensure to practice psychology in North Carolina was on or after October 1, 2014*).

- [11]** ☐ Check here if you wish to relinquish your license (must complete Items 1-9 and return form without fee)

By submission of this form, I certify that every statement made in this renewal application, including any attachments, is in all respects true and correct to the best of my knowledge and belief. I acknowledge that making any fraudulent, misleading or false statements on this renewal application could be considered a violation of the Code of Conduct and could subject me to discipline by the Board pursuant to N.C.G.S. § 90-270.15(a)(5).

✓ Before mailing, check to make sure that:

- (1) ☐ Renewal fee of **\$275.00** enclosed
Make payable to the NC Psychology Board, and write your license number on check/money order (your license number is printed on the top right corner on Page 1)
- (2) ☐ Items 1-10 checked/completed,
- (3) ☐ Item 10 checked "Yes" (if licensed in NC at any level on or before October 1, 2014), and
- (4) ☐ completed Supervision Report(s) enclosed
(if a Licensed Psychological Associate or provisionally Licensed Psychologist)