



GEORGIA STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS

237 Coliseum Drive Macon, Georgia 31217-3858

(404) 424-9966 [The Georgia State Board of Examiners of Psychologists](http://www.gabep.org) | [Georgia Secretary of State \(ga.gov\)](http://www.ga.gov)

APPLICATION FOR REINSTATEMENT OF A LAPSED OR REVOKED LICENSE

PART I - PERSONAL INFORMATION

Non-Refundable Fee: \$260

(Fee includes a \$10 mail in application processing fee)

(Checks returned for insufficient funds will be assessed a service charge pursuant to O.C.G.A. §16-9-20).

Name: _____
Last First Middle Maiden

Other name used, if any: _____

*Social Security # _____ / _____ / _____ Date of Birth: _____ / _____ / _____ **E-Mail: _____

* This information is authorized to be obtained and disclosed to state and federal agencies pursuant to O.C.G.A. 19-11-1 and O.C.G.A. 20-3-295, 42 U.S.C.A. 551 and 20 U.S.C.A.1001. **Acknowledgement of your application will be sent by e-mail. Also, if any additional information is needed, e-mail is the most efficient way for the Board staff to contact you so that your application can be processed in the most efficient manner. Please notify the Board of any e-mail address change. YOUR E-MAIL ADDRESS WILL NOT BE SHARED WITH ANY THIRD PARTY.

***Physical Address: _____
(NO P.O. Box's) Street City State Zip Code

***If you are granted a license, your name, city, state, and license number are public information and will appear on the internet. Your physical address is required, if different than the mailing address. You must immediately notify the Board in writing of an address change).

Mailing Address: _____
(If different than Physical Address) Street (P.O. Box Acceptable) City State Zip Code

Home Phone: ()

Work Phone: ()

PART II - STATEMENT OF APPLICANT

I hereby apply to reinstate my lapsed/revoked Psychologist License Number: **PSY** _____,

Issued on: _____ and Expired on: _____
Month/Day/Year Month/Day/Year

When was the last date you practiced as a psychologist in Georgia? _____

- **Reinstatement within one year of the expiration date**, at the discretion of the Board, upon submission of an Application for Reinstatement, documentation of 40 hours of continuing education activities that were completed within two calendar years of the date the application is received by the Board, and payment of penalty fee as set by the Board (See Fee Schedule). CE Report form **MUST** be included.
- **Reinstatement after more than twelve (12) months** following revocation for failure to renew will require documentation of 40 hours of continuing education activities that were completed within two calendar years of the date the application **and passage of both the Georgia Jurisprudence and Oral Examinations.” Board Rule, Chapter 510-7-.02 (a).** CE Report form **MUST** be included.
- If the applicant holds a current license in another jurisdiction, a Georgia license that was revoked for one or more years for failure to renew the license may be reinstated, at the discretion of the Board, upon completion of the requirements set forth above, submission of a **verification of all licenses currently held, or that have been ever been held regardless of status**, and, passage of **both** the Georgia Jurisprudence and Oral Examinations. Board Rule, Chapter 510-7-.02 (b)

■ **NEW: Complete the registration with Fieldprint/GAPS as required by the Board to cause the submission of a criminal background check as required by O.C.G.A. §§ 43-39-6 and 43-39-8(b)(6). The applicant shall be responsible for all fees associated with the performance of such background check - see instructions on how to register and complete the fingerprint check posted on the Board website, Application/Form Downloads link (Same webpage you found this application on).**

■ **Please state reason/s why you did not renew your license and describe your professional activities for the past two (2) years:**

PART III - PROFESSIONAL BACKGROUND

- For the following questions, the terms “license,” “registration” and “certification” are synonymous.
- If your answer is “yes” to any question, please attach a written detailed explanation, relevant documents and a description of the current status. Failure to do so will delay the processing of your application. Attach additional pages as necessary.

Yes No Do you now hold, or have you in the past held a professional license in any state?
Type of License: _____
State: _____ License# _____
Date Issued: _____ Expiration Date: _____

Type of License: _____
State: _____ License# _____
Date Issued: _____ Expiration Date: _____

Yes No Have you been denied professional licensure or renewal because of a license disciplinary proceeding in Georgia or any other state?

Yes No Have you knowingly failed to renew a license during investigation or disciplinary action?

Yes No Have you ever had a license to practice any profession revoked, suspended or annulled or otherwise disciplined, including by private order?

Yes No Have you been subject to disciplinary action or had your membership revoked by any professional organization?

Yes No Have you been convicted of any criminal offense?

Yes No Have you ever been arrested or convicted of a felony, misdemeanor (other than a minor traffic violation), crime involving moral turpitude, or a crime violating federal or state law relating to controlled substances or dangerous drugs? (DWI and DUI are not minor traffic violations.) For purposes of this question, a "conviction" includes a finding of verdict of guilty, plea of guilty, a plea of nolo contendere, or first offender treatment, and also includes adjudication of guilt or sentence withheld or not entered on the charge(s).

NOTE: The answer to this question is "YES" if an arrest or conviction has been pardoned, expunged, dismissed or deferred, you pled & completed probation under First offender and/or your civil rights have been restored and/or you have received legal advice that the offense will not appear on your criminal record.

If "yes," please include a certified copy of the court records and final disposition from the court with your application. In the event the file no longer exists, you must submit documentation from the court stating that fact. Also include a personal letter of explanation regarding each incident.

Yes No Have you been the defendant in a malpractice suit and either entered into a settlement agreement or paid court awarded expenses?

Yes No Are you currently **unable to practice safely** because of use of alcohol, drugs, narcotics, chemicals or any other type of material, or as a result of any mental or physical condition?

Yes No Have you previously applied for the same license for which you are currently applying?
If "yes" name under which application was submitted: _____

IF YOU HAVE ANSWERED "YES" TO ANY OF THE ABOVE BACKGROUND QUESTIONS, YOU MUST PROVIDE A WRITTEN, SIGNED AND DATED LETTER OF EXPLANATION OF THE ANSWER, AND ANY SUPPORTING DOCUMENTS REGARDING THE MATTER.

AFFIDAVIT REGARDING CITIZENSHIP

Please submit this document along with a copy of your secure and verifiable document to the Board office as indicated on the application.

Print Name: _____

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Board for which I am applying for licensure and I agree to abide by these laws and rules.

By executing this affidavit under oath, as an applicant for a professional license, as referenced in O.C.G.A. § 50-36-1, administered by the Professional Licensing Boards Division, the undersigned applicant also verifies one of the following with respect to his/her application for a public benefit (check one):

1) I am a United States citizen. Please submit a copy of your current Secure and Verifiable Document(s) such as driver’s license, passport, or document as indicated on pages 4 & 5 of this application. Failure to do so will delay the processing of your application.

2) I am not a United States citizen, but I am either a legal permanent resident of the United States or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number (See pages 4 & 5of this application).

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

In making the above representations under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute. I also understand that any failure to make full and accurate disclosures may result in disciplinary action by the Board for which I am applying for licensure.

Executed in _____(city), _____(state).

Signature of Applicant

Date

Printed Name of Applicant
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

DAY OF _____, 20_____

NOTARY PUBLIC
My Commission Expires: _____

Notary Seal

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2
Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”) provides that “not later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

_____ A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

_____ A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

_____A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. §50-36-2(b)(3); 22 CFR § 41.2]

_____A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

_____A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

_____In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]