



CERTIFICATION OF COMPLETION OF PROFESSIONAL DEVELOPMENT UNITS & CONVICTION/DISCIPLINE

The Board of Occupational Therapy has received your renewal application and fees. However, you failed to complete the renewal form as required. In order to process your renewal, you must complete all five (5) sections of this form, sign, and date. Return to the Board by MAIL or EMAIL at the above address.

1. PROFESSIONAL DEVELOPMENT UNITS

ACTIVE RENEWAL: I successfully completed 24 Professional Development Units (PDUs) in accordance with Title 16, California Code of Regulations sections 4160-4163.

FIRST RENEWAL: PDUs are not required for first license renewal following issuance of the initial license.

INACTIVE RENEWAL: I am requesting inactive status and not subject to the PDU requirement. I am aware that I cannot practice in California with an "inactive" license.

***NOTE:** If your renewal form was not received on or before the expiration date of your license, you *CANNOT* renew with Inactive Status.

2. CONVICTION

Have you been arrested, convicted, or pled guilty or nolo contendere to any crime, since your license was issued or since you last renewed? This includes all arrests, pleas, and convictions for misdemeanors and felonies and traffic violations involving drugs or alcohol, and all citations or infractions involving fines over \$700.

NO Ses Nature of Conviction & Court

3. DISCIPLINE

Have you had any license disciplined or a renewal denied by a government agency, the USA or its territories, military court, a foreign government, or other disciplinary body since your license was issued or since you last renewed?

NO State_

4. LISTING THE PDUs YOU COMPLETED SINCE YOU LAST RENEWED IS REQUIRED: (see next page)

Course Name	# of PDUs	Date Completed
Course Name	# of PDUs	Date Complete
Course Name	# of PDUs	Date Completed
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Course Name	# of PDUs	Date Completed
Course Name	# of PDUs	Date Completed
Course Name	# of PDUs	Date Completed
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Course Name	# of PDUs	Date Completed
Course Name	# of PDUs	Date Completed

5. CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Please print: Na	ame	OT/OTA #
·		Please circle one

Date

Signature of License Holder

You CANNOT work with an expired license!

If you have questions, please contact the Board at (916) 263-2294.