

TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS

333 Guadalupe 2-450 Austin Tx 78701
 PH. (512) 305-7700 FAX (512) 305-7701

LICENSE RENEWAL FOR:

EXPIRATION DATE: _____

NAME- (PLEASE PRINT) LAST FIRST MIDDLE

LICENSE # (S): _____

Online Renewal: Licensees may renew online no earlier than 60 days prior to license expiration date. Go to www.tsbep.state.tx.us, click on renewals/online renewals and continuing education. Scroll down to online renewal link.

Paper Renewal: If you do not renew online, please use this renewal form. Attempting to renew with this paper form earlier than 60 days prior to license expiration date will result in a returned renewal, as your application fee(s) will not be available on the system. The continuing education declaration form is available at www.tsbep.state.tx.us, under the renewal menu. You may print it off the website to submit with your renewal. You may renew more than one license with one paper renewal form.

Circle the appropriate license (s) and fee(s) on the renewal form and submit it, along with the appropriate fee and the continuing education form.

INFORMATION (CHANGES ONLY)

NAME: _____ (SEND LEGAL DOCUMENT)
 ADDRESS _____ CITY _____ STATE _____ ZIP _____
 BUSINESS PHONE: _____ HOME PHONE : _____
 DATE OF BIRTH: _____

PLEASE CIRCLE ALL LICENSES YOU ARE RENEWING:

	Renew by Expiration Date	1-90 Days Past Expiration Date	91 Days -1 yr Past Expiration Date
<u>Licensed Psychologist- Without Health Service Provider (HSP)</u>	\$412	\$712	\$1,012
<u>Licensed Psychologist- With Health Service Provider (HSP)</u>	\$432	\$732	\$1,032
<u>Licensed Psychologist - Over 70</u>	\$216	\$516	\$816
<u>Licensed Psychologist - Over 70, with HSP</u>	\$236	\$536	\$836
<u>Provisionally Licensed Psychologist</u>	\$316	\$616	\$916
<u>Provisionally Licensed Psychologist Over 70</u>	\$216	\$516	\$816
<u>Licensed Psychological Associate</u>	\$121	\$421	\$721
<u>Licensed Psychological Associate Over 70</u>	\$16	\$316	\$616
<u>Licensed Specialist In School Psychology</u>	\$64	\$169	\$274
<u>Licensed Specialist In School Psychology Over 70</u>	\$14	\$119	\$224

I CERTIFY THAT THE INFORMATION ON EACH PAGE IS CORRECT OR HAS BEEN CORRECTED. I HAVE READ AND WILL ABIDE BY ALL OF THE REQUIREMENTS OF THE PSYCHOLOGISTS' LICENSING ACT AND BOARD RULES.

Signature: _____

Date: _____

Check Amount: \$ _____

ADDITIONAL REQUIRED INFORMATION - Complete entire page

Name: _____

- A. Have you reviewed and updated your online profile required for license renewal?(Licensed Psychologist only) YES NO
- B. Have you been arrested, charged, sentenced, or placed on community supervision or pretrial diversion for any crime which you have not previously reported to the Board? If yes, attach or submit an explanation and documentation reflecting the criminal charges and its status. Do not resubmit documentation of previously reported offenses. YES NO
- C. Have you been a party (plaintiff or defendant) to any civil lawsuit pertaining to the practice of psychology or involving any patient or former patient not previously reported to the Board? If so, provide documentation to the Board. YES NO
- D. Is there pending action or a final action against a mental health license/certificate held by you in any jurisdiction that you have not previously reported to the Board? If yes, list the jurisdiction and provide supporting documentation. _____ YES NO
- E. Do you have a guaranteed student loan in default? (Must send repay agreement.) YES NO
- F. Are you currently in default of any court-ordered child support payments? YES NO
- G. Have you obtained the required continuing education hours? YES NO
- H. Do you currently hold an additional type of mental health license/certificate in Texas or any other jurisdiction? If yes, please list all jurisdictions and license/certificate types. _____ YES NO

EMPLOYMENT (Circle and fill in the appropriate setting information)

- A. I am currently employed in an exempt agency (a governmental facility or a regionally accredited institution of higher education.) Licensed and Provisionally Licensed Psychologists may deduct the \$200 professional fee if applicable.
Name of the exempt agency: _____ Phone # of agency: _____
- B. I am a Licensed Psychologist in a non-exempt setting and have no supervisees.
- C. I am a Licensed Psychologist and supervise the psychological services of the following: List name and credential (example: PA,PLP)

- D. I am a Licensed Specialist in School Psychology. List all LSSP supervisees.

School District or Districts: _____
- E. I am Provisionally Licensed or a Licensed Psychological Associate and am supervised by: (Name/Lic.#)

lic.# _____

lic.# _____
- F. Currently, I am not employed in a psychological setting.

INACTIVE STATUS:
To place your license on inactive status, submit: 1) \$100 (Submit a separate check for any other fee you might submit) 2) your wall license (not permit), and 3) written request for inactive status. Note: Your license must be current, not delinquent to qualify.