Texas State Board of Examiners of Psychologists

Application Materials for Reinstatement of a License

Please check to make sure you have all of the following documents before completing your application.

☐- Reinstatement Checklist
☐- Reinstatement Application Form
☐- Instructions to Applicants for Obtaining Fingerprint Criminal Record Checks
   ☐- FAST Fingerprint Pass Form – For use by In-State Applicants Only*
   ☐- FAST Fingerprint Pass Form – For use by Out-of-State Applicants*
☐- Fee Schedule*

*Items denoted with asterisks must be downloaded from the Board’s website at www.tsbep.texas.gov/form-bank, or obtained directly from the Board.
Checklist for Application
For Reinstatement of a License

To ensure that your application for reinstatement is processed as efficiently as possible, please submit the following to the Texas State Board of Examiners of Psychologists:

A. Completed application form. Be sure to include complete names and addresses of persons listed.

B. Application fee: A fee of $200 (non-refundable) per license, payable to the Texas State Board of Examiners of Psychologists (T.S.B.E.P.), to cover the cost of the Board's consideration of your request for reinstatement.

C. Documentation of Licensure in Other Jurisdictions. Documentation of licensure in other jurisdictions must be provided to the Board directly from any jurisdiction(s) in which the applicant has held licensure, including information regarding disciplinary actions and pending complaints. This documentation must consist of a statement which has a notary seal or state seal and should also include your licensure number and the issue and expiration dates. (No TSBEP form is provided for this.)

D. Self-query Report from National Practitioner Data Bank (NPDB). A self-query report from the NPDB. The report must be submitted in the sealed envelope in which it was received from the NPDB.

E. DPS/FBI fingerprint criminal history record checks. In accordance with the separate instruction sheet, obtain a full state and federal criminal history record check by submitting your fingerprints to the vendor, MorphoTrust USA.

F. Professional Development Hours. If you are seeking to reinstate a license that has been expired or retired for five or more years, or was revoked or resigned, you must submit proof of completion of at least 40 hours of professional development within the preceding 24 months that meets the requirements of Board rule 461.11.

The above items must be received in the Board office before the processing of your application can be completed. Failure to include the application fee will result in your application being immediately returned to you.

Applications are reviewed within six weeks of receipt, and in the order in which they are received. In the event your application is found to be incomplete or agency staff have questions regarding your application, a staff member will contact you with his or her question or regarding any missing or incomplete items. **Do not contact agency staff within this six week period unless you are responding to an inquiry from staff.** In the event you have not heard from the agency within six weeks of submitting your application, you may contact agency staff, preferably via email, to check
on the status of your application. Telephone calls and emails requesting a status update within the initial six week review period only serve to increase application processing times for all applicants.

Please keep in mind that a complete application packet is only the beginning of the process, and must be followed by passage of the jurisprudence examination. Applicants may not apply to sit for or submit examination fees until they have been approved by the Board. Upon receipt of an application for reinstatement, the Board will approve an applicant to sit for the jurisprudence examination and send instructions on how to apply for the examination.

If you do not use this application form within the next three months, please check the Board’s website to ensure you have the most recent version of this document.

Applicants are encouraged to keep a copy of all materials submitted to the agency in the event materials are lost in transit. Applicants are also encouraged to submit application materials via a method that allows tracking and proof of delivery. It is the applicant’s responsibility to ensure that all required materials are received by the agency; the agency is not responsible for items lost or misdirected while in transit.
# APPLICATION FOR REINSTATEMENT OF A LICENSE

<table>
<thead>
<tr>
<th>APPLICANT INFORMATION</th>
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<tbody>
<tr>
<td><strong>Full Legal Name:</strong></td>
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<tr>
<td><strong>Name as it Appeared on Previous License:</strong></td>
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<tr>
<td><strong>Mailing Address:</strong></td>
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<tr>
<td><strong>Primary Phone No.:</strong></td>
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<tr>
<td><strong>Email Address:</strong></td>
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<tr>
<td><strong>Social Security No.:</strong></td>
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<tr>
<td><strong>Driver’s License No. and State of Issuance:</strong></td>
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<tr>
<td><strong>Gender:</strong> □Male □Female</td>
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</tbody>
</table>

**License(s) to be Reinstated:**
- □Licensed Psychologist (LP)
- □Provisionally Licensed Psychologist (PLP)
- □Licensed Psychological Associate (LPA)
- □Licensed Specialist in School Psychology (LSSP)

**Previous License No(s).**
Are you a U.S. citizen or otherwise lawfully present within the United States of America? □ Yes □ No

Pursuant to 8 U.S.C.S. §§1621 and 1625, you are required to submit proof of legal presence in the U.S. when applying for professional licensure. Please enclose one of the following forms of acceptable proof.

ACCEPTABLE DOCUMENTS TO ESTABLISH U.S. CITIZENSHIP

A person who is a citizen of the United States as evidenced by one of the following:

1. A copy of a birth certificate issued in or by a city, county, state, or other governmental entity within the United States or its outlying possessions.
3. A birth certificate or passport issued from:
   A. Puerto Rico, on or after January 13, 1941;
   B. Guam, on or after April 10, 1898;
   C. U.S. Virgin Islands, on or after February 25, 1927;
   D. Northern Mariana Islands, after November 4, 1986;
   E. American Samoa;
   F. Swain’s Island; or
   G. District of Columbia.
4. A U.S. passport (expired or unexpired).
8. An individual Fee Register Receipt (Form G-711) that shows that the person has filed an application for a New Naturalization or Citizenship Paper (Form N-565).
9. Any other document which establishes a U.S. place of birth or indicates U.S. citizenship (e.g. Texas driver’s license).
10. Copy of social security card.

ACCEPTABLE DOCUMENTS TO ESTABLISH LEGAL PRESENCE

An alien or nonimmigrant applying for professional licensure must submit supporting documentation to establish legal presence under one of the following categories:

1. An alien lawfully admitted for permanent residence under the Immigration and Naturalization Act (INA). Evidence includes:
   • INS Form I-551 (Alien Registration Receipt Card commonly known as a “green card”); or
   • Unexpired Temporary I-551 stamp in foreign passport or on INS Form I-94.
2. An alien who is granted asylum under Section 208 of the INA. Evidence includes:
   • INS Form I-94 annotated with stamp showing grant of asylum under Section 208 of the INA;
   • INS Form I-688B (Employment Authorization Card) annotated “274a.12(a)(5)”;
   • INS Form I-766 (Employment Authorization Document) annotated “A5”;
   • Grant Letter from the Asylum Office of INS; or
   • Order of an immigration judge granting asylum.
3. A refugee admitted to the United States under Section 207 of the INA. Evidence includes:
   • INS Form I-94 annotated with stamp showing admission under Section 207 of the INA;
   • INS Form I-688B (Employment Authorization Card) annotated “274a.12(a)(3)”;
   • INS Form I-766 (Employment Authorization Document) annotated “A3”; or
   • INS Form I-571 (Refugee Travel Document).
4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA. Evidence includes:
   • INS Form I-94 with stamp showing admission for at least one year under Section 212(d)(5) of the INA.
5. An alien whose deportation is being withheld under Section 243(h) of the INA as in effect immediately prior to September 30, 1996 or Section 241(b)(3) of such Act (as amended by Section 305(a) of Division C of Public Law 104-208). Evidence includes:
   • INS Form I-668B (Employment Authorization Card) annotated “274a.12(a)(10)”;
   • INS Form I-766 (Employment Authorization Document) annotated “A10”; or
   • Order from an immigration judge showing deportation withheld under Section 243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under Section 241(b)(3) of the INA.
6. An alien who is granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980. Evidence includes:
   • INS Form I-94 with stamp showing admission under Section 203(a)(7) of the INA;
   • INS Form I-688B (Employment Authorization Card) annotated “274a.12(a)(3); or
   • INS Form I-766 (Employment Authorization Document) annotated “A3”.
7. An alien who is a Cuban or Haitian entrant (as defined in Section 501(e) of the Refugee Education Assistance Act of 1980). Evidence includes:
   • INS Form I-551 (Alien Registration Receipt Card, commonly known as a “green card”) with the code CU6, CU7, or CH6;

Application for Reinstatement of a License
8. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA. Evidence includes:
   - INS Form I-94 showing this status.
9. An alien who has been declared a battered alien. Evidence includes:
   - INS petition and supporting documentation.

**OTHER LICENSES AND CREDENTIALS**

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<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>Do you now hold or have you ever held a license to practice psychology in this state or in any other jurisdiction?</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>If so, please identify the type of license held, the issuing jurisdiction, the license number, and the current status of the license in the space below.</td>
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<td>Do you now hold or have you ever held a license to practice another form of behavioral healthcare (e.g. social work, marriage and family therapy) other than psychology, in this state or in any other jurisdiction?</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>If so, please identify the type of license held, the issuing jurisdiction, the license number, and the current status of the license in the space below.</td>
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<tr>
<td>If you are licensed to practice psychology in another jurisdiction, have you requested written verification of your license from the other jurisdiction and that it be sent directly to this agency?</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td><em>When requesting the written verification, please request that the verification include any available information on administrative or disciplinary actions taken or pending against the license.</em></td>
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<tr>
<td>Have you ever had an application denied or been refused a license to practice psychology or any other form of behavioral or mental healthcare?</td>
<td>☐</td>
<td>☐</td>
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<td><em>If so, please attach a written explanation identifying the jurisdiction that denied the application or request for licensure and describing the basis for the denial.</em></td>
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Has there been in the past or is there currently pending any administrative or disciplinary action initiated by a health or occupational regulatory agency, or an agency or office within the federal government, against you or a license currently or previously held by you?

*If so, please attach a written explanation of the nature of the administrative or disciplinary action, as well as the resolution of the matter. Additionally, please submit the information identified in Board rule 469.11(a)(4) regarding the administrative or disciplinary action along with your application.*

| ☐ Yes | ☐ No |

### SPECIFIC REINSTATMENT CRITERIA

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td><strong>Was the license(s) you are seeking to reinstate allowed to expire, revoked, or resigned?</strong></td>
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<td><em>If so, please attach a written narrative supporting this application that addresses each of the criteria listed in Board rule 463.22(h).</em></td>
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<td>☐ Yes</td>
<td>☐ No</td>
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<tr>
<td><strong>If the license(s) you are seeking to reinstate has been expired or retired for five or more years, or was revoked or resigned, have you completed at least 40 hours of professional development within the preceding 24 months that meets the requirements of Board rule 461.11?</strong></td>
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<tr>
<td><em>If so, please include proof of the professional development completed.</em></td>
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<td>☐ Yes</td>
<td>☐ No</td>
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### SPECIAL ACCOMMODATIONS

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td><strong>Do you have a disability or impairment recognized under the Americans with Disabilities Act (ADA) which will necessitate special accommodations during the administration of any examinations?</strong></td>
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<td><em>If so, please attach a written description of your disability or impairment and the accommodations you are requesting. When submitting an application and request for accommodation, you must include a formal medical or mental health diagnosis made or confirmed within the previous five years describing the need for specific accommodations.</em></td>
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<tr>
<td>☐ Yes</td>
<td>☐ No</td>
<td></td>
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<tr>
<td><strong>Have you received any accommodations in the past for this disability or impairment?</strong></td>
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<tr>
<td><em>If so, please attach a written description of the accommodations received, as well as any accommodations requested but not provided.</em></td>
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<tr>
<td>☐ Yes</td>
<td>☐ No</td>
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### EXAMINATION HISTORY

<table>
<thead>
<tr>
<th>Have you previously taken the Board’s Jurisprudence Examination?</th>
<th>☐ Yes  ☐ No</th>
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<tbody>
<tr>
<td>If so, please provide the following information:</td>
<td></td>
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<tr>
<td>For What License? (e.g. LPA, LSSP)</td>
<td>Score Received:</td>
</tr>
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</table>

### EMPLOYMENT HISTORY

<table>
<thead>
<tr>
<th>Are you currently providing psychological services in Texas?</th>
<th>☐ Yes  ☐ No</th>
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<tbody>
<tr>
<td>If so, which of the following serves as the basis for your delivery of services in Texas:</td>
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<tr>
<td>☐ Licensed by this agency.</td>
<td></td>
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<tr>
<td>☐ Providing services which are exempt under Section 501.004 of the Psychologists’ Licensing Act.</td>
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<tr>
<td>☐ Providing services which are exempt under Board rule 461.10(c).</td>
<td></td>
</tr>
<tr>
<td>☐ Other: ______________________________________________</td>
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<tr>
<td>☐ None of the above.</td>
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If you claim to be providing services under either exemption referenced above, please attach a detailed description of the setting in which these services are being provided, as well as the type of services being provided sufficient for agency staff to determine whether the setting and services fall within the scope and spirit of the law. When providing a description for an exemption under Board rule 461.10, please include documentation from the post-doctoral program reflecting substantial equivalency to one of the programs specified in the rule.

### Current Employment

**Current Employer:**

**Position Title:**

**Description of Duties:**

**Employer’s Address:**

**Supervisor’s Name:**

**Supervisor’s License No.:**

**Supervisor’s Phone No.:**

**Starting Date of Employment:**

### Criminal History and Disqualifying Factors

Excluding minor traffic violations, have you ever been convicted, sentenced, or placed on community supervision or pretrial diversion for any crime?

If so, please attach a written explanation, along with copies of relevant documentation including the charging instrument (i.e. information and complaint, or

| ☐ Yes  ☐ No |
indictment), judgment, order of deferred adjudication or other dispositive order, any agreements concerning deferred disposition, and a copy of the terms and conditions of any probation or community supervision ordered. You also need to provide evidence of payment of any costs, restitution, and fines assessed against you.

| Have you ever engaged in the practice of psychology without a license or other legal authority in this state or any other jurisdiction? | □ Yes □ No |
| Have you ever aided or abetted another individual in the unlawful practice of psychology? | □ Yes □ No |
| Are you physically and mentally able to render competent psychological services to the public in a safe manner? | □ Yes □ No |
| Do you use drugs or alcohol to an extent that affects your professional competency? | □ Yes □ No |

**PERSONAL ACKNOWLEDGEMENT**

By signing and submitting this application, you are acknowledging:

- that the information contained in this application is true and correct and that any misrepresentation may constitute a criminal violation under Section 37.10 of the Penal Code and a basis for future disciplinary action under Board rule 461.16;
- that the Public Information Act is enforced by this agency as required by state law;
- the Board has permission to seek any information or references it deems appropriate regarding your credentials pertinent to this application;
- you have read the Psychologists’ Licensing Act and Board rules and are familiar with both;
- that pursuant to Section 57.491 of the Education Code, a license issued by this Board may not be renewed if the licensee is in default of either a loan guaranteed by the Texas Guaranteed Student Loan Corporation or a repayment agreement;
- that pursuant to Section 232.0135 of the Family code, this application or a future renewal may be denied for failure to pay child support;
- the application and examination fees submitted in connection with this application are non-refundable;
- that the failure to submit all required documentation and information may delay the processing of your application, or result in your application going void or being denied;
- that you have ninety (90) days following receipt of this application by the agency to ensure that all documentation and information required under Board rule 463.5 has been submitted;
- that it may take agency staff up to six weeks to process your application;
- that you have an obligation to keep your address of record current while your application is being processed; and
- that you must wait until the Board receives this application packet before undergoing the required fingerprint criminal history background check.

**Signature:**

**Date:**
**Instructions to Applicants for Obtaining Fingerprint Criminal Record Checks**

**NOTE:** For those applicants reapplying for licensure, a Texas Department of Public Safety (DPS)/FBI fingerprint criminal history record checks is valid for six (6) months only.

Prospective applicants should wait until they apply before completing their fingerprint criminal history check. The Board is prohibited by state and federal law from accessing an individual’s criminal history record information until that individual has applied for licensure. Applicants who obtain their fingerprint criminal history check prior to applying for licensure will be removed from the Board’s access queue in the DPS system and may suffer delays in the licensure process as a result thereof. In an effort to ensure criminal history results are available to agency staff when processing an application, applicants are encouraged to wait five business days after mailing or delivering their application to the Board before completing their fingerprint criminal history check.

The Board is not permitted to receive or utilize fingerprint criminal history checks performed for other governmental entities. Thus, an applicant will need to undergo a fingerprint criminal history check, regardless of whether he/she has undergone one recently for another governmental entity. However, applicants who currently hold a license issued by this agency and underwent a fingerprint criminal history record check as part of the licensing process for that license do not need to undergo another check.

**Texas Residents:**
**Process for Obtaining Fingerprint Criminal Record Checks**

Applicants for licensure with the Texas State Board of Examiners of Psychologists (TSBEP) who reside in Texas are required to obtain fingerprint criminal history checks through the FACT Clearinghouse (formerly known as FAST Pass). This is a DPS program that provides electronic capture and submission of your fingerprints, and is the fastest and highest quality option available. Applicants may register for and schedule an appointment for their fingerprint criminal record check by downloading the in-state *Texas Fingerprint Service Code Form (FAST Fingerprint Pass Form)* from the Board’s website.

**Non-Resident or Foreign Applicants:**
**Process for Obtaining Fingerprint Criminal Record Checks**

Applicants for licensure with the Texas State Board of Examiners of Psychologists (TSBEP) who do not reside in Texas are required to obtain fingerprint criminal history checks for licensure.

Non-resident or foreign applicants may submit a written request for the out-of-state applicant fingerprint criminal record check packet, or download the out-of-state *Texas Fingerprint Service Code Form (FAST Fingerprint Pass Form)* from the Board’s website and follow the accompanying instructions. Email requests for applicant fingerprint packets should be directed
to Open.Records@tsbep.texas.gov. When requesting an out-of-state applicant fingerprint criminal record check packet, please be sure to include a mailing address. There is no charge for this fingerprint packet. The packet will include the Texas Fingerprint Service Code Form (FAST Fingerprint Pass Form), an instruction sheet about the process, and a fingerprint card to obtain the manual fingerprints.

Applicants electing to download the out-of-state Texas Fingerprint Service Code Form (FAST Fingerprint Pass Form) may submit a written request for an official FBI fingerprint card to the Board, or obtain an official FBI fingerprint card from any amenable law enforcement agency. If an applicant obtains an official FBI fingerprint card from any source other than the Board, it is critical that the applicant print or type the correct ORI number (TX922240Z) on the form in the box labeled “ORI.” Failure to do so will delay the licensure process and require the applicant to submit to another fingerprint criminal history background check. It is the applicant’s responsibility to ensure the correct ORI number is utilized and that it is legible.

Once an applicant is pre-enrolled with the vendor, he or she must take the official FBI fingerprint card to a law enforcement agency in the applicant’s state or country to have his or her fingerprints taken. Applicants should be prepared to pay a fee for having their fingerprints taken, as some agencies do charge a fee. The fingerprints must be taken by an appropriately trained law enforcement official. The fingerprint card must also be signed by a law enforcement official in the appropriate block. Please follow the directions on the card and provide all information requested except for the following: Your No.; FBI No.; Armed Forces No.; Miscellaneous No.; or Reason Fingerprinted.

After your fingerprints have been taken, please follow the mailing instructions set forth in the confirmation document provided to you upon completion of your pre-enrollment with MorphoTrust USA. The vendor will forward your digitized fingerprints to DPS.