

**APPLICATION FOR INACTIVE
 LICENSE STATUS**

FOR BPM USE ONLY

Fee paid: _____	Receipt #: _____
Date Cashiered: _____	Cashier's Initials: _____
Date Approved: _____	Date Denial: _____
Approved Initial: _____	

NO PRACTICE PERMITTED

Section 701 of the Business and Professions Code permits a licensee who is not actively engaged in the practice of podiatric medicine in the State of California to maintain a licensure in a non-practicing "inactive" status.

Inactivating a license does not change the expiration date, and the renewal fee is the same as the fee for an active license. **THERE ARE NO FEE EXEMPTIONS FOR INACTIVE LICENSES.**

A DPM who holds an inactive license need not comply with continuing competence requirements in order to renew his/her inactive license. If your license is delinquent, a payment of all accrued renewal fees, delinquent fee, and penalty fee must be submitted. If your license has not expired, no fee is required.

If your California DPM license is currently suspended, revoked, or otherwise restricted by the Board, an "inactive" license cannot be issued.

Please print or type. Illegible applications will be returned.

LICENSEE INFORMATION:

LICENSE NUMBER:

E-MAIL/PHONE NUMBER:

DATE OF BIRTH:

EXPIRATION DATE:

NAME:

The address of record is public information and will be displayed on the Board of Podiatric Medicine's website.

STREET ADDRESS

CITY

STATE

ZIP CODE

COUNTRY

Important Information

To restore an inactive license to active status, you must complete the 50 hours of approved continuing medical education and one of the continuing competence requirements within the two years prior to filing an application for restoration.

Please note that the holder of an Inactive license status **may not engage in the practice of podiatric medicine.**

You must disclose, if since your last renewal, you have had any license disciplined by a government agency, or have been convicted of, or pled guilty, to any crime. Do not list charges dismissed under section 1000.3 of the California Penal Code or equivalent non-California laws, or convictions two years or older under California Health and Safety Code Sections 11357(b), (c), (d), (e), or section 11360(b).

“Conviction” includes a plea of no contest and any conviction that has been set aside or deferred pursuant to Sections 1000 or 1203.4, 1203.4a, or 1203.41 of the Penal Code, including infractions, misdemeanors, and felonies.

You do not need to report a conviction for an infraction with a fine of less than \$300 unless the infraction involved alcohol or controlled substances. You must, however, disclose any convictions in which you entered a plea of no contest and any convictions that were subsequently set aside pursuant or deferred pursuant to Sections 1000 or 1203.4, 1203.4a, or 1203.41 of the Penal Code.

“License” includes permits, registrations, and certificates. “Discipline” includes, but is not limited to, suspension, revocation, voluntary surrender, probation, or any other restriction.

TO BE COMPLETED BY LICENSEE:

Are you currently serving, or have you previously served in the military?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Since you last renewed your license, have you had any license disciplined by a government agency or other disciplinary body; or, have you been convicted of any crime in any state, the U.S.A. and its territories, military court or a foreign country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA TO THE TRUTH AND ACCURACY OF THE ABOVE INFORMATION.

Name (Please print) _____ License Number _____

Signature _____ Date _____

Signature and date are required to process this request.

Any physician who submits an application for a CME/CC waiver which is denied by the Board will become ineligible to renew his or her license to practice medicine until such time that the required fees are remitted and satisfactory evidence of completion of the renewal requirements is provided.

Following approval of this request, a Doctor of Podiatric Medicine will continue to receive biennial renewal notices. Please complete and return these renewal notices to maintain an inactive status license.

All items in this application are mandatory; none are voluntary. This information is requested by the Licensing Program of the California Board of Podiatric Medicine. Failure to provide any of the requested information may result in this application being rejected as incomplete. The information provided will be used to determine your eligibility for waiver of the Continuing Medical Education or Continuing Competence requirements pursuant to Section 1339.678 of Title 16, California Code of Regulations. Access to records by the individual to whom they pertain may be obtained under the Information Practices Act contacting the custodian of records at 2005 Evergreen Street, Suite 1300, Sacramento, CA 95815.

This form must be mailed to the board at 2005 Evergreen St., Ste. 1300, Sacramento, CA 95815