

REQUEST FOR VERIFICATION OF VIRGINIA SOCIAL WORK LICENSE

IMPORTANT NOTICE:

The Department of Health Professions provides a **free** service of primary source license verification available at <https://dhp.virginiainteractive.org/Lookup/Index>. We encourage licensees seeking verification of their license to use [License Lookup](#).

Request for an official verification of a Virginia Social Work license to be sent to another jurisdiction requires this form with a processing fee. The Virginia Board of Social Work will electronically send the Verification of Licensure with available public information to the jurisdiction selected below on this form. This information **cannot** be mailed, faxed or emailed to the licensee.

This form requires a **\$25.00 fee** for official verification of a Virginia license, which can be paid by check or money order made payable to the **"Treasurer of Virginia."** If you are requesting multiple documents, you will need to submit each form separately. There is a \$25.00 fee for each request. **Request received without the required fee will not be processed by the Board.**

License verifications are provided in the standard format of the Department of Health Professions. **Forms from other jurisdictions will not be completed.**

Examination test scores are not available for distribution by the Virginia Board of Social Work. You must contact the Association of Social Work Boards ("ASWB") for primary source verification at (800) 225-6880.

A copy of your original licensure file cannot be provided in accordance with the Code of Virginia. Therefore, licensees should refer to their own file copies or refer to the Regulations that were in effect at the time they were licensed for the minimum requirements of licensure. Regulations can be found on the Board's website under "Regulations History."

License Verification will provide the following information:

- License Number
- License Type
- Name of Licensee
- Any Additional Public Information
- Initial License Date
- Expiration Date
- License Status

Please allow approximately 7-10 business days following receipt of the request for processing. You will receive an email notification when the request is completed. Please mail this request form and \$25.00 payment to:

**Department of Health Professions
Board of Social Work
9960 Mayland Drive, Suite 300
Henrico, VA 23233-1463**

Last Name:	First Name:	Middle/Maiden Name:	Suffix:
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Social Work License Number: (10 digit number) _ _ _ _ _ _ _ _ _ _	Last 4 digits of Social Security Number: XXX-XX- _ _ _ _
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Phone Number:	Email Address:
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Jurisdiction where the Verification of Licensure should be sent:

Signature of Licensee

Date

FOR OFFICE USE ONLY (Finance Division)

Fee Amount Paid
 \$ **25.00**

Applicant ID #

Receipt #

Date Processed