

COMMONWEALTH OF VIRGINIA

Board of Medicine

Department of Health Professions

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WEB PAGE: www.dhp.virginia.gov/medicine

APPLICATION TO REACTIVATE AN INACTIVE LICENSE FOR A BEHAVIOR ANALYST OR ASSISTANT BEHAVIOR ANALYST PURSUANT TO VIRGINIA REGULATIONS 18VAC85-150-90(A) 1-3

BEHAVIOR ANALYST

ASSISTANT BEHAVIOR ANALYST

INSTRUCTIONS: Complete application and return to the board office with the required fee of \$54.00 for a Behavior Analyst and DPM and \$28.00 for an Assistant Behavior Analyst. Make your check payable to the Treasurer of Virginia.

Name (Last, First, M.I., Suffix, Maiden Name)

Social Security # or DMV control #

Mailing Address (Street and/or Box Number, City, State, Zip Code)

Virginia License #:

Number of years in inactive status:

Email address:

Please submit evidence of competency to return to active practice to include **one of the following:**

_____ 1. Information on continued practice in another jurisdiction as a licensed behavior analyst or a licensed assistant behavior analyst or with certification as a BCBA® or BCaBA® during the period in which the license has been inactive or lapsed; (You may have a Form B completed by your employer. See the Board’s website under forms and applications)

_____ 2. Twelve hours of continuing education for each year in which the license has been inactive or lapsed, not to exceed three years; (Provide copies of certificates of completion) or

_____ 3. Recertification by passage of the BCBA® or the BCaBA® certification examination from the BACB.

SIGNATURE: _____ DATE: _____

(FOR OFFICE USE ONLY)

Date Received:	Fee Received:	Approved:	Date:
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