

Douglas A. Ducey
Governor

Mario Fontes, L.Ac.
Chairman

Mindy Hayden, L.Ac.
Secretary



Acupuncture Board of Examiners

1740 W. Adams, Ste 3005
Phoenix, Arizona 85007

Telephone (602) 364-0145 • Fax (602) 926-8104

David Geriminsky
Executive Director

Acupuncture License Renewal Application

A.R.S. § 32-3925 and R4-8-204

Scope of License :
Unrestricted practice of Acupuncture
in the State of Arizona.

Term:
One year.

A license holder who fails to renew on or before the date the license expires shall immediately cease and desist from engaging further in any practice until the license is reinstated. An individual may apply for reinstatement of license within 60 days after the expiration of the license. Failure to do so will require an individual to re-apply for a license.

Requirements For Renewal of License

1. Submit renewal fee of \$275.00 by check or money order payable to the Arizona Acupuncture Board of Examiners. **DO NOT SEND CASH.**
2. Complete all sections of this application and submit it to the Board.
3. The Continuing Education requirements for renewal are:
 - a) A license holder shall complete a minimum of 15 hours of Board approved continuing education per year.
 - b) An acupuncturist shall retain for a minimum of 2 years records of all continuing education course work completed. The Board, at its discretion, may audit a random sample of acupuncturists who report compliance with the continuing education requirement.
 - c) Instructors of approved continuing education courses may receive 1 hour of continuing education credit for each classroom hour taught.
 - d) An acupuncturist may receive one hour for attending one board meeting during the year.
 - e) An acupuncturist may receive 15 hours credit for each article written on the practice of acupuncture or oriental medicine that is published in a peer-reviewed professional journal or text book during the year for which the hours apply.
4. Incomplete renewal applications forms will be returned.

Requirements for Reinstatement of License

1. Submit renewal application.
2. Submit renewal fee of \$275.00 plus a \$100.00 late fee.
3. Submit documentation of 15 hours of continuing education attendance.
4. Submit a sworn affidavit that the individual has not practiced acupuncture since the license expired.

A.R.S. 41-1030(B) An Agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule, or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or conditions.

A.R.S. 41-1030(D) This section may be enforced in a private civil action and relief may be awarded against the State. The Court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the State for a violation of this section.

A.R.S. 41-1030 (E) A State employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency's adopted personnel policy.

A.R.S. 41-1030 (F) This section does not abrogate the immunity provided by Section 12-820.01 or 12-820.02.

ADMINISTRATIVE USE ONLY:

Date Received: _____ Amount: _____ Check No.: _____ Receipt No.: _____

Answer The Following Questions Relating To The Last 12-Months

- Yes** **No** Has any licensing authority of any other state, district, or territory of the United States or any other country or subdivision of any country, denied you a license or certificate to practice acupuncture; or revoke, suspend, limit, restrict, or take any other action regarding your license or certificate to practice acupuncture? **If so, provide a detailed written explanation**
- Yes** **No** Have you been convicted of a crime, including driving under the influence of drugs or alcohol, other than a minor traffic offense? **If so, provide a detailed written explanation.**
Note: Pursuant to A.R.S. 32-3208 an applicant who has been charged with a misdemeanor or felony involving conduct that may affect patient safety must notify the regulatory board in writing within ten working days after the charge is filed.
- Yes** **No** Have you had a claim for malpractice or a lawsuit filed against you alleging professional malpractice or negligence in the practice of acupuncture? **If so, provide a detailed written explanation**
- Yes** **No** Do you have any condition that may impair your ability to practice acupuncture safely and skillfully? **If so, provide a detailed written explanation**
- Yes** **No** Have you ever resigned, voluntarily or involuntarily, from a healthcare facility while under investigation or had a healthcare facility terminate, restrict, or take any other action regarding your employment, professional training, or privileges? **If so, provide a detailed written explanation.**

I certify that I have completed _____ hours of Continuing Education training per R4-8-206. I certify that I have established a protocol for the secure storage, transfer and access of medical records pursuant to A.R.S. 32-3211.

Clearly Print Or Type All Information

Full Name: _____

License Number: _____

Business Address:

Employment Status: Self Employed Have an Employer

Name of Business: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number(s): _____ Fax Number: _____

E-Mail: _____

Home Address:

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number(s): _____ E-Mail: _____

Designate which address will be your address of record which all mail will go and is of public record.

Business Address

Home Address

With this application for license renewal, I submit the following signed statement under penalty of perjury that the facts in the application are accurate, true and complete.

Signature

Date