

OREGON BOARD OF EXAMINERS OF LICENSED DIETITIANS

License Renewal Application

Deadline: Postmarked or received by October 31, odd year.
*A delinquency fee of \$25 is charged for applications/payments postmarked after October 31st.

Renewal Fee: #1277	<u>\$150.00</u>
*Late Fee: #1810	<u>\$25.00</u>
Total Amount Enclosed \$	<u> </u>

Enclose check or money order payable to

BOARD OF EXAMINERS OF
LICENSED DIETITIANS.
800 NE OREGON ST
PORTLAND, OR 97232-2187

Please review the information printed below. Cross out incorrect information and replace with correct information

NAME AND GENERAL INFORMATION

Lic. No _____

(If your name has changed, documentation may be required.)

HOME ADDRESS

Mail to: Home Work

Street _____

City _____ State _____ Zip _____

Phone _____

BUSINESS ADDRESS

Business Name _____

Street _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-Mail Address(es) _____

AREAS OF PRACTICE

Clinical Community Education Medical Nutrition Therapy

Consulting Administrative Research

Other _____

Pursuant to ORS 691.405 to 691.555 and OAR 834-010-0045, please respond to the following questions in conjunction with your license renewal. Please answer “YES” or “NO” in the space provided. If the answer is “YES” to anything contained in questions 1 through 5, please include a letter of explanation and any related official documentation. (Include all police reports, court documents, final actions, *etc.*)

1. Since your last license renewal, have you been investigated, disciplined or denied licensure by any governmental licensing agency in any state, possession of the United States, or foreign country? _____
2. Since your last license renewal, have you surrendered your license in any state, possession of the United States, or foreign country? _____
3. Since your last license renewal, have you been arrested, charged with, convicted of, or sentenced for any type of law violation (other than a traffic ticket) by any governmental licensing agency in any state, possession of the United States, or foreign country? _____
4. Since your last license renewal, have you abused or been treated for the abuse of alcohol or controlled substances? _____
5. Since your last license renewal, have you suffered from and/or received treatment for a mental, physical, or emotional condition which could impair your ability to practice safely? _____

AFFIDAVIT

I swear that the statements contained in this application are true and correct in every respect; that I have complied with all of the requirements of the law pertaining to the licensing of Licensed Dietitian; and that I have read and understand this affidavit.

THIS DOCUMENT MUST BE SIGNED AND DATED OR YOUR APPLICATION WILL BE CONSIDERED INVALID AND RETURNED.

(Signature of Applicant)

(Date of Signature)

REMEMBER TO INCLUDE A COPY OF YOUR UNEXPIRED CDR CARD (if instructed on main page)!

Are you interested in learning about veterans' benefits? _____

SIGNED COPY OF CDR DOCUMENT

The Board requires a "***copy***" of your ***current*** Commission on Dietetic Registration (CDR) card **returned with this application.**

SUGGESTED DIRECTIONS

1. Place your current signed CDR card with your signature/date side up over these directions.
2. Make a copy of this *whole page with your CDR card on it.*
3. Sign and Date the copy in space below.
4. Mail in this document with completed application and fee.

This is a true and correct copy of my CDR card!

Signature

date

The above form and suggested directions are provided to help clarify and simplify the Board's request for a copy of your CDR card. We hope it helps!

Instruction: (The following is optional.)

Please answer the following questions regarding your rating of service provided by the agency "Board of Examiners of Licensed Dietitians."

Scale:

Excellent (E)

Good (G)

Fair (F)

Poor (P)

Don't Know (DK)

Questions:

TIMELINESS

1. How do you rate the timeliness of the services provided by the agency?

ACCURACY

2. How do you rate the ability of the agency to provide services correctly the first time?

HELPFULNESS

3. How do you rate the helpfulness of agency employees?

EXPERTISE

4. How do you rate the knowledge and expertise of agency employees?

AVAILABILITY OF INFORMATION

5. How do you rate the availability of information at the agency?

OVERALL SERVICE

6. How do you rate the overall quality of services provided by the agency?