

**OREGON PHYSICAL THERAPIST LICENSING BOARD
800 NE OREGON STREET, SUITE 407
PORTLAND, OR 97232-2187
PHONE: 971-673-0200**

**APPLICATION FOR EARLY RELEASE FOR NPTE
Physical Therapist & Physical Therapist Assistant**

***** (Type or Print in Ink) *****

NAME: _____
(Last) (First) (Full Middle) (Maiden)

**Fee \$25.00
Pay by separate check made payable to OPTLB**

- 4115 - PHYSICAL THERAPIST**
- 4215 - PHYSICAL THERAPIST ASSISTANT**

***** MANDATORY REQUIREMENTS *****

To be eligible for an Early Release to take the NPTE your official graduation date must be within 90 days of the examination date. An early release is dependent on your Program Directors authorization approving you to test before graduation. All didactic work must be completed prior to application for Early Release

SIGNED: _____ **DATE:** _____

**** FOR OFFICE USE ONLY ****

Graduation Date: _____
Exam Date: _____
Release Date: _____
Completed Application: _____
Registered for NPTE _____
Approval by Program Director _____