

# Psilocybin Facilitator License Application Guide for Applications Submitted Online

PUBLIC HEALTH DIVISION  
CENTER FOR HEALTH PROTECTION  
Oregon Psilocybin Services (OPS)  
<http://oregon.gov/psilocybin>

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Table of Contents

- Introduction ..... 3
- Facilitator License Requirements ..... 4
- Facilitator License Application Packet Checklist..... 4
- Getting Started with TLC ..... 5
- TLC Dashboards ..... 6
  - TLC Messaging ..... 7
- Begin a Facilitator License Application ..... 8
- Facilitator Applicant Information Tab ..... 9
  - Previous License or Permit..... 11
  - Resident Statement (Expires 2025)..... 12
  - High School Diploma or Equivalent Statement ..... 12
  - Upload Photo Identification..... 13
- Documents Tab..... 13
  - Upload Completion Certificate from a Facilitator Training Program with OPS Approved Curriculum ..... 14
  - Upload Social Equity Plan ..... 15
  - Upload Reduced Fee Documentation..... 16
- OPS Facilitator Regulations Exam Tab ..... 16
- Fee Information Tab..... 17
  - Non-Refundable Application Fee: \$150 USD ..... 17
  - Non-Refundable Facilitator Annual License Fee: \$2,000 USD or \$1,000 USD if applicant qualifies for Reduced License Fee ..... 17
  - Accepted Payment Methods..... 18
  - Fee Payment Clearance..... 18
- Review and Submit Tab ..... 19
- Online Fee Payment ..... 19
  - Online Application Fee Payment ..... 19
  - Online Annual License Fee Payment ..... 20

Mailed or In-Person Fee Payment and Remittance Form.....	20
Mailed or In-Person Application Fee Payment.....	20
Mailed or In-Person Annual License Fee Payment.....	22
Background Checks.....	22
Application Review.....	23
Incomplete and Insufficient Applications.....	23
Application Approval and Proof of License .....	23
Worker Permit.....	25
Notification of Changes .....	25
Frequently Asked Questions (FAQs).....	26

## Introduction

The purpose of this guide is to provide additional support to applicants submitting a psilocybin facilitator license application **ONLINE**. The most current version of this guide and the online application guide can be found on the web at [Oregon Psilocybin Services \(OPS\) – Facilitator License webpage](#). Applicants must read, understand, and agree to adhere to the Oregon Psilocybin Services statutes and administrative rules, outlined in [Oregon Revised Statute \(ORS\) Chapter 475A](#), [Oregon Administrative Rules \(OAR\) Division 333, Chapter 333](#), as well as any other applicable statutes or laws.

The [Oregon Psilocybin Services – Training Program, Licensing, and Compliance system \(TLC\)](#) is an online platform where applicants can apply for psilocybin licenses, worker permits, and training program curriculum approval. Please visit <https://psilocybin.oregon.gov> to complete the application online. If you are unable to complete the application packet online, you may print, complete, and mail the application packet and pay the application fee following the instructions provided in the remittance form at the end of this application. Printable application forms may be found [here](#).

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. If you need these written materials in other languages, braille, large print, or other formats, please contact:

[OHA.Psilocybin@oha.oregon.gov](mailto:OHA.Psilocybin@oha.oregon.gov)  
(971) 673-0322

For all other questions and concerns regarding licenses and worker permits, please contact:

[Licensing.Psilocybin@oha.oregon.gov](mailto:Licensing.Psilocybin@oha.oregon.gov)  
(971) 673-0304

**DISCLAIMER:** Psilocybin remains a schedule I drug under the federal Controlled Substances Act. Applicants are responsible for making their own determinations regarding the legal risks associated with participating in this program. The information provided in the application materials, including applicant and instructor names, is subject to disclosure under Oregon’s public records laws.

## Facilitator License Requirements

- Must be 21 years of age or older
- Must have a high school diploma (or equivalent)
- Must be a resident of Oregon (provision expires in 2025)
- Must complete a facilitator training program with curriculum that has been approved by OPS
- Must pass the OPS Regulations Exam
- Must pass a criminal background check
- Must pay a license application fee
- Must pay an annual license fee

## Facilitator License Application Packet Checklist

Please use the following checklist to assist in planning and ensuring the application is complete.

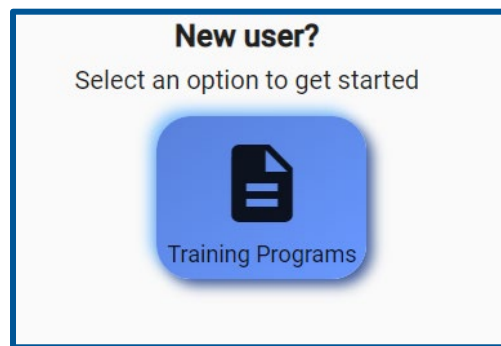
- ✓ Completed and signed Facilitator License Application
- ✓ Copy of the front and back of a valid, unexpired government-issued photo identification. Accepted identification includes:
  - Passport;
  - Driver license, whether issued by the State of Oregon or by another state of the United States;
  - Identification card issued under ORS 807.400;
  - United States military identification card;
  - An identification card issued by a federally recognized Indian tribe with photo, name, and date of birth; or
  - Any other identification card issued by a state or territory that bears a picture of the person, the name of the person, the person's date of birth and a physical description of the person.
- ✓ Copy of certificate of completion from a psilocybin facilitator training program with OPS approved curriculum
- ✓ Copy of the social equity plan
- ✓ Pass the OPS Regulations Exam
- ✓ Copy of reduced licensing fee documentation (if applicable). If requesting a reduced licensing fee, please include a copy of one of the following required supporting documents:
  - A copy of a current monthly Social Security Income benefit statement showing dates of coverage
  - A copy of the applicant's current eligibility statement or card if

- enrolled in Oregon Health Plan
  - A copy of current proof of food stamp benefits from the Oregon Supplemental Nutrition Assistance Program
  - A copy of proof of having served in the Armed Forces, such as but not limited to, submitting a Veteran’s Administration form DD-214
- ✓ \$150 Non-refundable license application fee

## Getting Started with TLC

Please visit <https://psilocybin.oregon.gov> to access TLC and create and account.

To begin an online application, account registration is required. To register a new account, select the new user button and click “Get Started!”



If you don't have an account registered, click “Sign up now”



Enter your email address, first name, last name, and create a password to create an account. To proceed, an email verification code must be entered. After clicking “Send verification code,” enter the code sent to the email address provided.

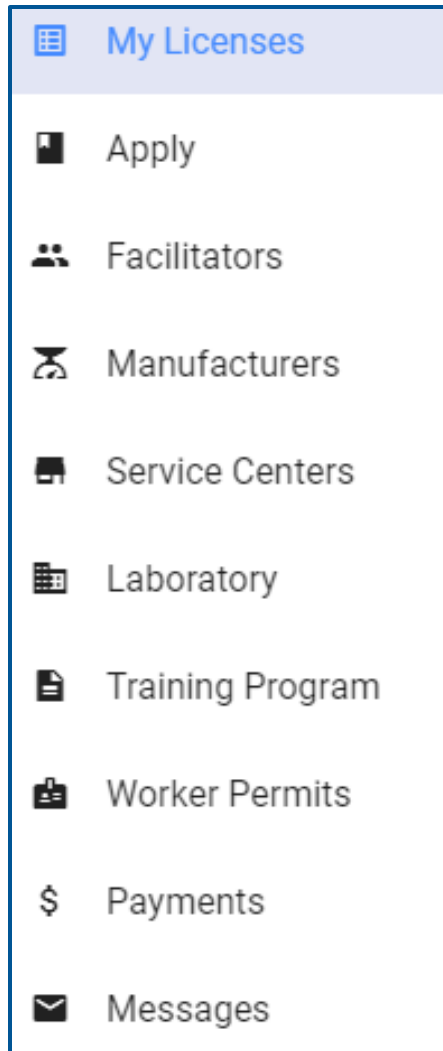
The screenshot shows the 'User Details' registration form for the Oregon Health Authority. At the top left is a '< Cancel' link. The Oregon Health Authority logo is centered at the top. Below the logo is the title 'User Details'. The form contains several input fields: 'Email Address', 'New Password', 'Confirm New Password', 'First Name', and 'Last Name'. A blue button labeled 'Send verification code' is positioned to the right of the 'Email Address' field, with an orange arrow pointing to it from the right. At the bottom of the form is a blue 'Create' button.

The screenshot shows the verification code input screen. It features a text input field labeled 'Verification Code' at the top. Below the field are two blue buttons: 'Verify code' on the left and 'Send new code' on the right.

## TLC Dashboards

Each license type and worker permits have unique dashboards in TLC. You can access each dashboard by clicking the type in the menu on the left side of the screen. The following dashboards are available in TLC:

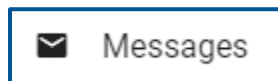
- My Licenses
- Apply
- Facilitators
- Manufacturers
- Service Centers
- Laboratory
- Training Program
- Worker Permits
- Payments
- Messages



### [TLC Messaging Dashboard](#)

Messages is a platform to communicate with the Oregon Psilocybin Services Licensing and Compliance teams. From this dashboard you can send messages to and receive messages from the license and compliance teams. You can include attachments and write a message in the open text field.

To navigate to Messages, select “Messages” from the menu on the left side of the screen.

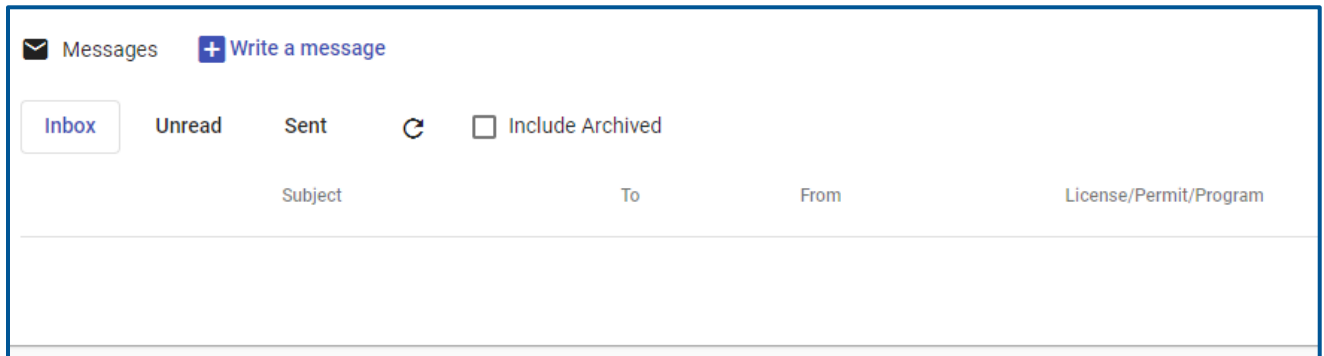


To write a new message select the 'Write a message' button. Then, select which team you are sending the message to. Please include the



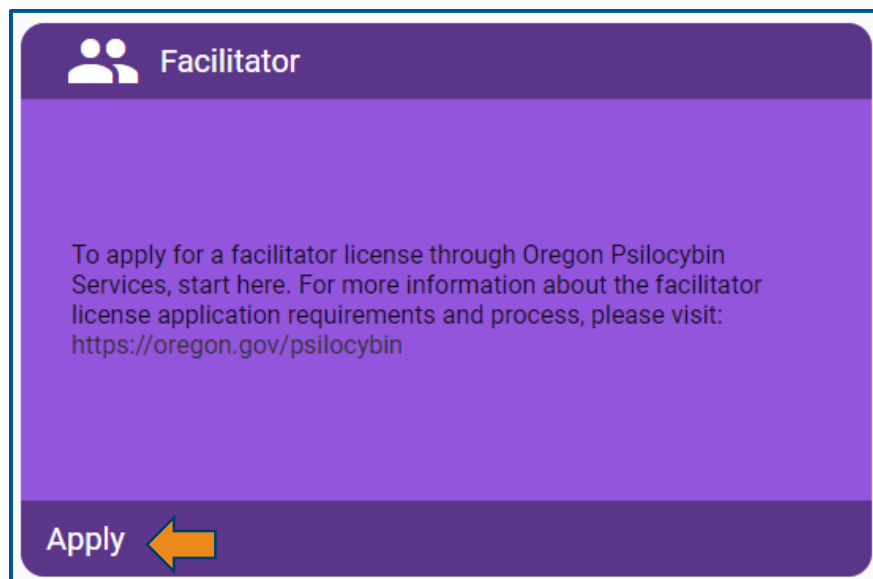
application, license, or permit ID number you are reaching out about with your message.

If your question is related to applying for a license, worker permit, or training programs, please direct your message to the licensing team. If your message is related to compliance or compliance rules questions, please direct your message to the compliance team. If you are unsure which team to send the message to, please select the team you think is most relevant and our teams will work together to answer the message.

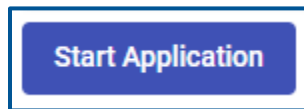


## Begin a Facilitator License Application

When you are ready to begin a facilitator license application, please click “Apply” from the left menu on the screen. All application types will be displayed. In the purple Facilitator box, click the “Apply” button.



You may also begin the facilitator application by clicking “Facilitators” from the left menu on the screen and then selecting “Start Application.”



**Review all information on the “Getting Started” page of the application before proceeding through the application.**

## **Facilitator Applicant Information Tab**

Please provide the following information on the “Applicant Information” tab:

- Legal Name (**required**)
- Preferred Name (**optional**)
- Prior Names and Aliases (**required**)
  - This information is used for the purposes of the background check
- Date of Birth (**required**)
- Social Security Number (**required if you have one**)
  - If you do not have a social security number, you may still be licensed or permitted by Oregon Psilocybin Services
  - As part of your application for an initial or renewal license, Federal and State laws require you to provide your Social Security Number (SSN), if you have one, to Oregon Psilocybin Services for child support enforcement purposes (42 USC § 666(a)(13) & ORS 25.785). If you are an applicant or licensee and you have an SSN but fail to provide your SSN, Oregon Psilocybin Services may refuse to process your application. Your SSN will be used only for child support enforcement purposes unless you confirm your agreement that OPS can use it for administrative purposes as well
  - In the application, we ask for **voluntary** consent to use your social security number, if you have one, to confirm your identity during the criminal records check. We will not deny you any rights, benefits, or privileges otherwise provided by law if you do not consent to use of your SSN for these administrative purposes

- Check the appropriate box next to the social security field indicating whether you consent or do not consent **(required)**
- Primary Phone Number **(required)**
- Alternate Phone Number **(optional)**
- Primary Email Address **(required)**
- Preferred Language **(optional)**
- Preferred Pronouns **(optional)**
- Physical Address **(required)**
- Mailing Address **(required)**
- Residential History Outside of Oregon in the Past 5 Years **(required if applicable)**
  - This information is used for the purposes of the background check

### Applicant Information

**Legal Name**

First Test	Last Test	Middle
---------------	--------------	--------

**Preferred Name**

First	Last	Middle
-------	------	--------

**Prior Names and Aliases**  
This information is used for the purposes of the background check

Name, other name, any other names	Date of Birth	📅
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**\*SOCIAL SECURITY NUMBER DISCLOSURE:**

- As part of your application for an initial or renewal license, Federal and State laws require you to provide your Social Security Number (SSN), if you have one, to Oregon Psilocybin Services for child support enforcement purposes (42 USC § 666(a)(13) & ORS 25.785). If you are an applicant or licensee and you have an SSN but fail to provide your SSN, Oregon Psilocybin Services may refuse to process your application. Your SSN will be used only for child support enforcement purposes unless you confirm your agreement that OPS can use it for administrative purposes as well.

**IMPORTANT NOTE: If you do not have a social security number, you may still be licensed or permitted by Oregon Psilocybin Services.**

- Based on our authority under OAR 333-333-4100, we are requesting your voluntary consent to use your SSN for the following administrative purposes only: to positively confirm your identity during the criminal records check. Oregon Psilocybin Services will not deny you any rights, benefits or privileges otherwise provided by law if you do not consent to use of your SSN for these administrative purposes (5 USC § 552(a)). **Please check the appropriate box next to the social security field indicating whether you consent or do not consent.**

SSN  
123-45-5678  I don't have a social security number

Do you consent to use of SSN for purposes of confirming identity during a criminal records check?

Yes

No

## Previous License or Permit

If you have ever applied for or received any other licenses or permit from Oregon Psilocybin Services, please provide this information within the online application.

### Contact Information

<b>Primary Phone</b> Phone (555) 555-5555	<b>Alternate Phone</b> Alt Phone
<b>Primary Email Address</b> Email	<b>Confirm Email Address</b> Confirm Email
<b>Preferred Language</b> Language English	

**Previous License or Permit:**  
 Have you applied for or received any other licenses or permit from Oregon Psilocybin Services?  
Please provide the license id(s) for each Oregon Psilocybin Services license.  
Affiliated Licenses

### Address

**Physical Address**

Street Apt/Unit/Suite	City	State
		OR
Zip	County	

**Mailing Address**  Same as physical

Street Apt/Unit/Suite	City	State/US territory/freely associated sta...
Zip		

**Residential history outside of Oregon in the past 5 years**  
\*This information is used for the purposes of the background check.  
\*City, state, country, from month/year to month/year.

City	State	Country	From Month ...	To Month an...	+
			MM/YYYY	MM/YYYY	

### Resident Statement (Expires 2025)

Until January 1, 2025, an applicant for a facilitator license must be a current Oregon resident and have been a resident of Oregon for two or more years.

Applicants must review and acknowledge the statement in the online application to be considered for licensure:

- I certify that I am a current Oregon resident and have been a resident of Oregon for two or more years

Applicants and licensees must retain documentation that demonstrates they meet the residency requirement. Applicants and licensees must provide documentation to OPS within 15 calendar days of a written request. Proof of residency may be demonstrated by providing:

- A valid Oregon driver license or Oregon identification card issued at least two years prior to the date of application
- Oregon full-year resident tax returns for the last two years
- Proof of Oregon voter registration issued at least two years prior to the date of application.
- Utility bills, lease agreements, rental receipts, mortgage statements or similar documents that contain the name and address of the applicant dated at least two years prior to the date of application and from the most recent month
- Letter from a homeless shelter, nonprofit entity, employer, or government agency attesting that applicant has been an Oregon resident for at least two years
- Any other documentation that the Authority determines to reliably demonstrate proof of Oregon residency for the last two years

### High School Diploma or Equivalent Statement

Applicants for a facilitator license must have a high school diploma or equivalent education.


Applicants must review and acknowledge the following statement in the online application to be considered for licensure:


- I certify I have a high school diploma or equivalent education as required by ORS 475A.325 (2)(d)

## Upload Photo Identification

Upload a copy of your photo identification by clicking “Browse” and selecting the file you would like to upload.

### Identity and Residency Verification


I certify that I am a current Oregon resident and have been a resident of Oregon for two or more years 

I certify I have a high school diploma or equivalent education as required by ORS 475A.325 (2)(d) 



You must upload a copy of the front and back of a valid, unexpired government-issued photo identification. Accepted identification includes:

- Passport;
- Driver license, whether issued by the State of Oregon or by another state of the United States;
- Identification card issued under ORS 807.400;
- United States military identification card;
- An identification card issued by a federally recognized Indian tribe with photo, name and date of birth; or
- Any other identification card issued by a state or territory that bears a picture of the person, the name of the person, the person's date of birth and a physical description of the person

Upload Your Identification

[Browse](#) 

Once the file is uploaded, it will appear in the adjacent box titled “Current Documents”. If you uploaded the incorrect file, you may delete the upload by clicking on the trash icon.

File	Requirement		
Test Document for Upload.jpg	Personal Identification		

## Documents Tab

Please upload the following documents in the Documents Tab of the application.

- Facilitator Training Program with OPS Approved Curriculum Completion Certificate
- Social Equity Plan
- Reduced Fee supporting document

Upload files by selecting the check box(es) indicating the type(s) of document. Click “Browse” and select the file(s) you would like to upload. You may upload documents individually or all at once.


### Upload Supporting Documents

For each document select the requirements it verifies



Training Certificate

Social Equity Plan

Reduced Fee



Once the files are uploaded, it will appear in the adjacent box titled “Current Documents”. If you uploaded the incorrect file, you may delete the upload by clicking on the trash icon.

File	Requirement		
Test Document for Upload.jpg	Training Certificate Social Equity Plan Reduced Fee		

### [Upload Completion Certificate from a Facilitator Training Program with OPS Approved Curriculum](#)


Applicants for a facilitator license must complete a facilitator training program prior to applying for licensure. Applicants must upload proof of training program completion with their application. Please visit <https://psilocybin.oregon.gov/training-approved> to view a list of training programs with OPS approved curriculum.

The information in this link includes the training program name, location, and website. Anyone interested in learning more about training programs, should reach out to the training programs directly for more information.

## Important Considerations:

- Training programs determine their application process, cost, duration, and overall structure of their program
- Psilocybin facilitator training programs may be required to be licensed by the Higher Education Coordinating Commission (HECC). While OPS reviews and approves curriculum for facilitator training programs, HECC has their own licensing requirements. We encourage prospective students to learn about a facilitator training program's HECC licensure requirements and status.

Please enter the approved training program and date completed into the fields provided:

Training Program Information	
Name of Training Program with OHA Approved Curriculum	
Approved Training Programs	Date Completed 
Training Date is required	

## Upload Social Equity Plan

Applicants must upload a social equity plan with their application. An applicant may determine the format and structure of the social equity plan while meeting the requirements in [OAR 333-333-4020](#) which describes the following:

Social equity plans must include a description of the following:

- Application of diversity, equity, justice and inclusion principles to the licensee's internal practices and policies.
- Objective performance measures that the licensee will use to evaluate their social equity plan.

If a facilitator is an employee of a licensed service center, the social equity plan requirements can be fulfilled by uploading a statement that references the service center's social equity plan. If a facilitator is an employee of more than one service center, the statement must identify each service center that employs the facilitator. If a facilitator contracts with a service center, they must submit their own social equity plan.



### Important Reminders:

- An applicant for license renewal must provide documentation of the evaluation of implementation of their social equity plan based on the objective performance measures required in social equity plans.
- Licensees must provide written notice, in a form and manner prescribed by the Authority, of any material changes to their social equity plan within 60 days of making the change.

### [Upload Reduced Fee Documentation](#)

If requesting a reduced licensing fee, please upload a copy of one of the following required supporting documents:

- A copy of a current monthly Social Security Income benefit statement showing dates of coverage
- A copy of the applicant's current eligibility statement or card if enrolled in Oregon Health Plan
- A copy of current proof of food stamp benefits from the Oregon Supplemental Nutrition Assistance Program
- A copy of proof of having served in the Armed Forces, such as but not limited to, submitting a Veteran's Administration form DD-214

## **OPS Facilitator Regulations Exam Tab**

Every applicant for a facilitator license must take the required OPS Regulations Exam and receive a passing score prior to being issued a facilitator license.

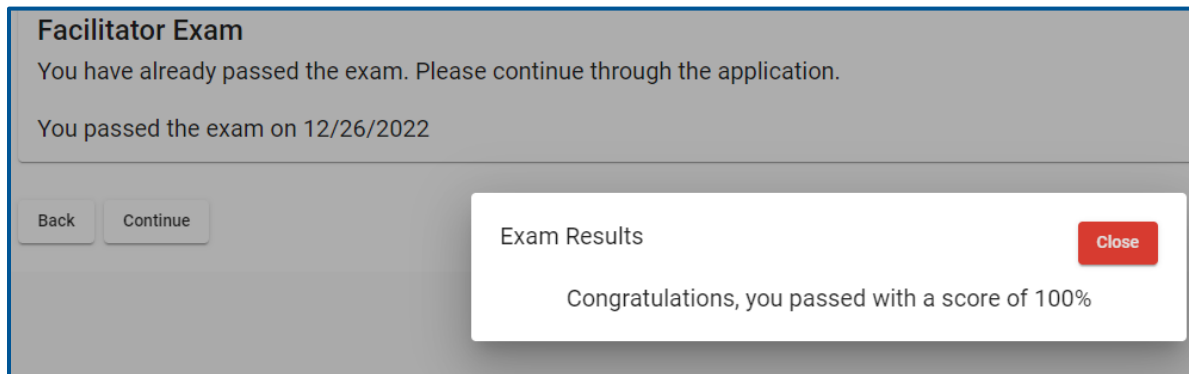
- A score of 75 percent is passing
- An applicant who does not pass the exam may retake the exam
  - The exam may be retaken immediately
  - There is no limit on exam retakes

Applicants may access and refer to the statute and administrative rules found in [ORS 475A](#) and [Oregon Administrative Rules](#) when answering exam questions. It may be helpful to have these links open while completing the exam.

**Important Note:** If the exam is exited before completion, the system does not currently have the ability to save the answers and we are working on it. With that, please plan for 30-60 minutes to take the exam. If you must

leave the exam, you may retake the exam immediately. Please contact us if you need assistance or an alternative exam format.

When you have passed the exam, the following screen will appear with the date passed and score.



## Fee Information Tab

### [Non-Refundable Application Fee: \\$150 USD](#)

The facilitator license has a non-refundable application fee of \$150 USD and will not be reviewed until the application fee payment has been received and cleared. The application fee may be paid online, by mail, or in person.

### [Non-Refundable Facilitator Annual License Fee: \\$2,000 USD or \\$1,000 USD if applicant qualifies for Reduced License Fee](#)

If your license application is approved, pending annual license fee payment and clearance, you will receive an email request to pay the non-refundable annual license fee. You will also see the “approved, pending annual license fee payment and clearance” status reflected in TLC. The annual license fee may be paid online, by mail, or in person.

To qualify for a reduced fee, an individual applicant must qualify under one of the following circumstances:

- Be receiving Social Security Income benefits. To qualify for the reduced fee, the applicant must upload at the time of application a copy of a current monthly Social Security Income benefit statement showing dates of coverage

- Be enrolled in Oregon Health Plan. To qualify for the reduced fee the applicant must upload a copy of the applicant's current eligibility statement or card
- Be receiving food stamp benefits through the Oregon Supplemental Nutrition Assistance Program. To qualify for the reduced fee the applicant must upload at the time of application current proof of their food stamp benefits
- Has served in the Armed Forces of the United States. To qualify for the reduced fee, the applicant must upload proof of having served in the Armed Forces, such as but not limited to, submitting a Veteran's Administration form DD-214

If you qualify for a reduced license fee, the fee will be reduced accordingly and will be reflected in the annual licensing fee payment request.

### Accepted Payment Methods

OPS accepts the following payment methods for online applications:

- Online
- Money Order
- Cashier's Check
- Personal/Business Check
  - Personal and business checks will be held for 21 days to ensure payment clearance
- Cash (**Please Do Not Mail Cash**)

### Fee Payment Clearance

An application will not be reviewed until the application fee payment has been received and cleared. If an applicant fails to pay the application fee within 90 calendar days of submitting the application, the application is considered incomplete and will be closed.

A license will not be issued until the license fee is paid and cleared. A licensee may not operate until the effective date of licensure. If an applicant fails to pay the annual license fee within 180 calendar days of being notified of the licensed being approved, pending license fee payment and clearance, the application is considered incomplete and will be closed.

## Review and Submit Tab

Please review the application details you entered. You must confirm and attest to all the statements at the end of the application. Once the application is completed and reviewed, please enter your signature.

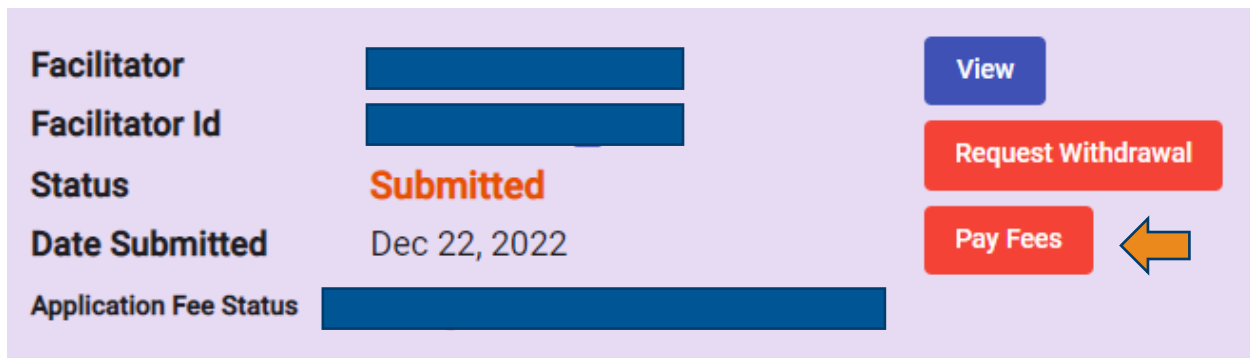
Once you click “Submit,” the application is submitted and the application status will display “Submitted.”

## Online Fee Payment

Applicants may pay their application and annual license fees through TLC. If you prefer to pay fees by mail or in-person, please review the “Mailed or In-Person Fee Payment and Remittance Form” section of this guide.

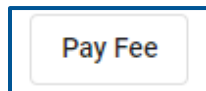
### Online Application Fee Payment

To pay fees online, click the “Pay Fees” button after you submit your application. You will be taken to the Payments section of TLC. This may also be accessed by selecting “Payments” from the navigation bar on the left side of the screen. Payments captures all payments for all license or permit applications.



Facilitator	[Redacted]	View
Facilitator Id	[Redacted]	Request Withdrawal
Status	Submitted	Pay Fees ←
Date Submitted	Dec 22, 2022	
Application Fee Status	[Redacted]	

Select the fee you would like to pay online by clicking “Pay Fee”



Scroll to the bottom of the payment instructions and select “Pay Online Now”



You will receive a warning that you are being directed to a third-party payment processor. Click “Proceed to Payment” to be transferred to the third-party payment processor and complete payment.

[Proceed to Payment:](#)

If you have any questions, please contact the licensing team through the Messages function in TLC or by email/phone at:

[Licensing.Psilocybin@oha.oregon.gov](mailto:Licensing.Psilocybin@oha.oregon.gov) or (971) 673-0304

### Online Annual License Fee Payment

Once a license application has been approved, pending fee payment and clearance, you will be notified by email. You will also see the application status “approved, pending fee payment and clearance” in the Facilitator dashboard.


Use the same instructions described above to generate, print, and pay the annual license fee online.

## **Mailed or In-Person Fee Payment and Remittance Form**

If you do not want to pay fees online, you may pay fees by mail or in-person. A remittance form is required if an applicant pays fees by mail or in person.

### Mailed or In-Person Application Fee Payment

An application fee payment remittance form is provided in TLC once the application is submitted. The remittance form can be viewed and printed by clicking the “Pay Fees” button.

<b>Facilitator</b>	<input type="text"/>	<input type="button" value="View"/>
<b>Facilitator Id</b>	<input type="text"/>	<input type="button" value="Request Withdrawal"/>
<b>Status</b>	<b>Submitted</b>	<input style="border: 2px solid orange;" type="button" value="Pay Fees"/>
<b>Date Submitted</b>	Dec 22, 2022	
<b>Application Fee Status</b>	<input type="text"/>	

By clicking the “Pay Fees” button, you will be taken the Payments section of TLC. This may also be accessed by selecting “Payments” from the navigation bar on the left side of the screen. “Payments” captures all payments for any license or permit application.

To view and print the remittance form, scroll to the bottom of the instructions and select “View Remittance Slip”.

A rectangular button with a blue background and white text that reads "View Remittance Slip". The button has a thin blue border.

The remittance form will display instructions for payment.

Money orders and checks are payable to: **Oregon Psilocybin Services**  
**Applicants can mail the application packet, money order or check, and remittance form to the following address:**

Oregon Health Authority - Public Health Division  
Fiscal Services  
RE: OPS  
PO Box 14260  
Portland, OR 97293-0260

**In-person payment with a money order or check:**

To make an in-person fee payment with a money order or check, proceed to Cashier’s Office on the second floor of the Portland State Office Building at:

800 NE Oregon St, Suite 200  
Portland, OR 97232  
Hours: 9am to 4pm, Mon to Fri

Additional instructions: The Cashier’s Office window is located on the second floor next to the Vital Health Statistics window. If security asks if you have an appointment, you may let them know you are dropping off a payment for Oregon Psilocybin Services at the Cashier’s Office window which does not require an appointment. Please include the remittance form with the payment and provide the application, if not already submitted by mail.

**To make cash payment arrangements or for payment questions, please contact the licensing team through the Messages function of TLC or by email/phone: [Licensing.Psilocybin@oha.oregon.gov](mailto:Licensing.Psilocybin@oha.oregon.gov) or (971) 673-0304**

### [Mailed or In-Person Annual License Fee Payment](#)

Once an application has been approved, pending fee payment and clearance, we will email you an annual licensing fee remittance form to submit with your license fee payment. You will also see the license status “approved, pending fee payment and clearance” in the Facilitator dashboard. Please include the remittance form with the annual license fee payment.

Use the same instructions described above to generate, print, and pay the annual license fee by mail or in-person. **Do not pay the annual license fee until OPS notifies you the application is approved, pending fee payment.**

## **Background Checks**

Individuals applying for a facilitator license are required to pass a criminal background check to be issued a license. Within the application, you will be asked to provide information required to initiate the background check process. The following information in the application will be used to initiate the background check:

- Legal name
- Prior names and aliases
- Date of birth
- Social security number
  - We ask for **voluntary** consent to use your social security number, if you have one, to confirm your identity during the criminal records check. We will not deny you any rights, benefits, or privileges otherwise provided by law if you do not consent to use of your SSN for these administrative purposes
- Physical address
- Mailing address (if different)
- Phone number
- Email
- Residential history outside of Oregon in the past five years

**Do not submit fingerprints until Oregon Psilocybin Services requests that you do so.**

Once we initiate a criminal background check, you will receive an electronic letter by email that explains how to schedule an appointment with a [FieldPrint](#) vendor. FieldPrint vendors are private contractors and are not associated with a government agency. Visit [this link](#) to find the nearest FieldPrint vendor to you.

For more detailed information on background checks, please review the [OPS - Overview of the Background Check Process](#) document.

## **Application Review**

OPS will review applications once the application fee payment is paid and cleared. Applications may take OPS several weeks to review and it will be reviewed in the order received. Thank you for your patience.

### Incomplete and Insufficient Applications

An application is considered **incomplete** if the application is missing required information (e.g., the application fee has not been paid or the applicant did not submit fingerprints). If the application is incomplete, we will notify you by email to give you an opportunity to make your application complete. You have 90 days from the initial date you are notified to complete your application. If you fail to do so, the application will be closed.

An application is considered **insufficient** if the complete application or site inspection does not meet requirements outlined in statute or rule. If the application is insufficient, we will notify you by email to give you an opportunity to meet requirements. You will have 90 days from the initial date you are notified to meet requirements, or your application will be denied.

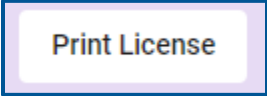
## **Application Approval and Proof of License**

Once the application has been approved (after the license fee is paid and cleared), we will notify you by email that the annual license is approved. You can view and print your proof of license which will include your name, license ID number, address, license effective date, license expiration date, and a QR code which can be scanned to verify license status. Please note,



the public facing license verification look-up and QR code will only confirm a license ID number, effective date, and expiration date.

From the Facilitators page in TLC, you can view and print your proof of license by clicking the “Print License” button.



The proof of license will display on the screen. Click the “Print” button. A PDF file will download to your computer that can be saved or printed. You may also revisit TLC anytime to print the proof of license.

Example of what the proof of license will look like:

A screenshot of a web page from the Oregon Health Authority. The page features the logo at the top left, a QR code on the right, and several redacted fields. The "Facilitator Number" field is redacted with a blue bar. The "Name and Address" section has two rows of redacted text. The "License Information" section shows "Approved Date" as 12/26/2022 and "Expiration Date" as 12/26/2023.

**Oregon Health Authority**

Facilitator Number: [Redacted]



**Name and Address**

Name	Address
[Redacted]	[Redacted]

**License Information**

Approved Date	Expiration Date
12/26/2022	12/26/2023

As outlined in [OAR 333-333-4120](#), facilitator licensees must be able to provide proof of licensure when performing preparation, administration or integration sessions. **A licensee may not operate until the effective date of licensure.**

## Worker Permit

An individual who is a licensee or a license representative must have a valid worker permit if the individual participates in:

- The provision of psilocybin services at a licensed premises
- The possession, manufacturing, securing, or selling of psilocybin products at a licensed premises
- The recording of the possession, manufacturing, securing, or selling of psilocybin products at a licensed premises
- The verification of any document described in ORS 475A.445

**Facilitators must obtain a psilocybin worker permit as they participate in the provision of psilocybin services.**

Please review the worker permit application and application guide by visiting the [Oregon Psilocybin Services \(OPS\) – Worker Permit webpage](#).

Please note: A person is not required to undergo a criminal background check and fitness determination if that person has completed a criminal background check and fitness determination in connection with another license application **within 30 days of their current license application.**

## Notification of Changes

Please review all rules for Notification of Changes as described in [OAR 333-333-4200](#). An applicant or licensee must notify OPS in writing within 10 business days of the changes described in rule. Please notify the OPS Licensing Team of these changes by emailing [licensing.psilocybin@oha.oregon.gov](mailto:licensing.psilocybin@oha.oregon.gov).

Most common changes which need to be reported by facilitator license applicants and licensed facilitators include:

- A change in contact information

- Any conviction for any misdemeanor or felony committed by an individual listed as an applicant or licensee
  - When notifying the OPS licensing team of changes to conviction history, please only include the following information
    - Legal Name
    - Facilitator License ID Number
    - A statement notifying OPS of a change to criminal history conviction
      - Please **DO NOT** provide any conviction details in the notification to OPS
  - A criminal background check is required if we learn that an individual has been convicted of a crime after their license has been issued.

## **Frequently Asked Questions (FAQs)**

### **Is the \$150 application fee refundable?**

No. The application fee is nonrefundable.

### **Is the annual license fee refundable?**

No. The annual license fee is nonrefundable.

### **How do I know the status of my fee payment?**

Once OPS receives the payment and the payment clears, OPS will mark the payment as “cleared.” This status is viewable on the Facilitator dashboard.

### **How long will it take OPS to review applications?**

OPS will review applications once the application fee payment is paid and cleared. Due to limitations in predicting application volume, it may take OPS several weeks to review applications. Thank you for your patience.

### **How do I know the status of my application?**

Due to limitations in predicting application volume, it may take OPS several weeks to review applications. You may also monitor the status of your application on the Facilitator dashboard.

If you have questions about the status of your application, please send a message through TLC or email/call:

[Licensing.Psilocybin@oha.oregon.gov](mailto:Licensing.Psilocybin@oha.oregon.gov)  
(971) 673-0304

**OPS sent me a notice that the application is incomplete or insufficient. What do I do now?**

If the application is incomplete, you have 90 days from the initial date you are notified to complete your application. If you fail to do so, the application will be closed. If the application is insufficient, you will have 90 days from the initial date you are notified to meet requirements, or your application will be denied. You may also request withdraw of the application at any time by notifying OPS. Please note, the application fee is nonrefundable.

**What happens if my application is closed? What happens if it is denied?**

If the application is closed, you may reapply and pay the nonrefundable application fee. If OPS denies an application, OPS will provide notice of the denial in writing and you have a right to a hearing under [ORS chapter 183](#).

**Can I withdraw my application?**

You may request withdraw of your application by sending us a TLC message or emailing/calling the OPS Licensing Team. Please note, the application fee is nonrefundable.

[Licensing.Psilocybin@oha.oregon.gov](mailto:Licensing.Psilocybin@oha.oregon.gov)  
(971) 673-0304

**How long is the license valid?**

The facilitator license term is one year from the effective date. OPS is currently developing the application renewal process for facilitator licenses.

**How do I know what the TLC ID number assigned to my license is?**

The TLC ID number can be found on the Facilitator dashboard.

**Who do I contact about general questions regarding license and permit questions?**

Please send us a message through TLC or email/call:

[Licensing.Psilocybin@oha.oregon.gov](mailto:Licensing.Psilocybin@oha.oregon.gov)  
(971) 673-0304