

# STATE OF OREGON Occupational Therapy Licensing Board

800 NE Oregon Street, Suite 407, Portland, OR 97232 [www.otlb.state.or.us](http://www.otlb.state.or.us) Tel: (971)673-0198

**OTA Reinstatement Fee: \$190** includes the 2 year fee of \$150. (Reinstatement fee of \$100+\$50 late fee), which expires May 31, 2020. Plus the \$40 for fingerprint background checks.  
If you do not need your license until **March 1, 2019**, pay \$140.(Reinstatement fee of \$50+ \$50 late fee). Plus the \$40 fingerprint/background check fee.



## APPLICATION TO RENEW EXPIRED OCCUPATIONAL THERAPIST ASSISTANT LICENSE

Complete, sign and return application with your fee. Make your check or money order payable to:  
**Oregon OT Licensing Board.**

Your Name : \_\_\_\_\_

(If your name changed, submit a copy of the legal document showing the name change)

Board E-mail \_\_\_\_\_  Check if you want your email public.

Your Current address: \_\_\_\_\_

Phone: \_\_\_\_\_ When did your last Oregon OT License expire? \_\_\_\_\_

Since getting licensed in Oregon, in which state(s) and years have you worked:

\_\_\_\_\_

**Please send verification(s) from any state(s) where you have worked since your Oregon license lapsed.**  
This is an official document from the state.

Current information:

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

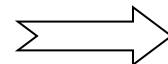
Phone No. \_\_\_\_\_ Supervisor's Name and Phone: \_\_\_\_\_

Type of Position \_\_\_\_\_ Full Time \_\_\_ Part Time \_\_\_ Temp Co: \_\_\_\_\_

Area of Practice: Please check your area of practice:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Developmental Disability | <input type="checkbox"/> Mental Health       | <input type="checkbox"/> Rehabilitation      |
| <input type="checkbox"/> Education                | <input type="checkbox"/> Pediatrics          | <input type="checkbox"/> Sensory Integration |
| <input type="checkbox"/> Geriatrics               | <input type="checkbox"/> Physical Disability | <input type="checkbox"/> Hand                |
| <input type="checkbox"/> Home Health              | <input type="checkbox"/> Private Practice    | <input type="checkbox"/> Other _____         |

Do you use telehealth in your practice? Yes  No



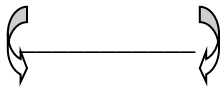
Please answer each question by putting a check  in the appropriate box. You must answer each question with either a "Yes" or "No" response. **If you answer Yes**, please provide a detailed explanation on a separate sheet of paper of the circumstances, include relevant dates, jurisdiction and/or parties involved, and sign and date the page. (It is not necessary to report a traffic citation). **You must include the police report of the incident otherwise the application is considered incomplete.** If you have had a prior citation, arrest or sanction, mark Yes, even if the issue has already been addressed by the Oregon OT Licensing Board.

14.	Have you ever been cited, arrested, charged with or convicted of a crime, offence or violation of law in any state or by the Federal Government even if those charges were dismissed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
15.	Have you ever been the subject of a complaint or lawsuit regarding your Occupational Therapy or any other professional practice?	Yes <input type="checkbox"/> No <input type="checkbox"/>
16.	Are there any unresolved or pending actions or complaints against you with any professional licensing or certifying authority?	Yes <input type="checkbox"/> No <input type="checkbox"/>
17.	Have you ever voluntarily surrendered any license or certification?	Yes <input type="checkbox"/> No <input type="checkbox"/>
18.	Have you ever been sanctioned by a professional licensing or certifying authority?	Yes <input type="checkbox"/> No <input type="checkbox"/>
19.	Have you ever had limitations or restrictions placed on a professional license or certification?	Yes <input type="checkbox"/> No <input type="checkbox"/>
20.	Do you have any condition that in any way impairs or may impair your capacity to perform duties of an Occupational Therapist with reasonable skill and safety?	Yes <input type="checkbox"/> No <input type="checkbox"/>

**CE defined:** participation in courses, classes, workshops and other means for the purpose of developing and updating professional skills to provide appropriate occupational therapy services.

Continuing Education: Oregon requires you to have 30 points of CE in the last two years or be currently NBCOT certified. If you are NBCOT certified, list your expiration date: \_\_\_\_\_.

How many points of continuing education have you completed?



**Write in the number of CE credits**

If you have not yet completed the required **Pain Management** CE please include them:

Pain Management Module, One hour:

Date completed: \_\_\_\_\_

Additional CE hours, Six hours:

Date completed: \_\_\_\_\_ Class: \_\_\_\_\_

I hereby certify to the Oregon Occupational Therapy Licensing Board that all of the information given in this application is true and correct. Any falsification could result in denial, suspension, and/or revocation of my license.

\_\_\_\_\_  
(Applicants signature)

\_\_\_\_\_  
(Date)

## **DIV 20 Administrative Rules 339-020-0020 CE Categories and Points + Pain Management**

**These numbers refer to a two year total of 30 points.** Credit for CE shall be calculated on a point basis in the following categories and must relate to occupational therapy services. It is the responsibility of the licensee to demonstrate how specific classes contribute to the development of the occupational therapy skills. "Application to OT Services" (CE Log) must be included for credit. Unless stated otherwise, one point equals one contact hour. Sixteen to 30 required CE points must come from categories 1-11. A limit of 14 of the required CE points may be accrued from categories 12-18.

(1) Attendance at university, college or vocational technical adult education courses at or above practice level: Four points per credit hour. Documentation of successful completion required.

(2) Attendance at seminars, workshops, or institutes: One point per direct hour of content.

(3) Completion of educational telecommunication network or on-line courses: Points as awarded by certificate or per credit, see (1). Certificate of successful completion required.

(4) Attendance at educational sessions relating to occupational therapy sponsored by OTAO, AOTA, AOTA approved providers, and NBCOT or professional academic institutions relating to occupational therapy: One point per hour of attendance. Certificate of attendance required.

(5) Satisfactory completion of American Occupational Therapy Association approved courses/materials or courses/materials offered by AOTA approved providers: Points per certificate on completion. Documentation of satisfactory completion required.

(6) Publication – Copy of publications required.

(a) Publication of article in non-peer reviewed publication (e.g. OT Practice, SIS Quarterly, Advance, etc.): Five points per article.

(b) Publication of article in peer-reviewed professional publication (e.g. journals, book chapter, research paper): Ten points per article.

(c) Publication of chapter(s) in occupational therapy or related textbook: Ten points per chapter.

(7) Professional presentation (person presenting): Presentation must be at practice level for credit, e.g. CNA training would not be acceptable: Two points per hour with no additional points for subsequent presentation of same content. Course outline must be provided.

(8) Development of alternative media (computer software, video or audio tapes): Three points/hr of finished product. Outline required.

(9) Completing requirements for occupational therapy specialty certification (initial or recertification one time only for each specialty): 12 points. Copy of certificate required.

(10) Research, provided an abstract of the research is retained to prove participation: Principal – Eight points. Associate – Six points.

(11) Development and implementation of a school approved Level II student program (one time only And completed within a year): Four points. Copy of program must be provided.

(12) In-service training: One point per hour of attendance.

(13) Attendance at videotaped presentations of educational courses, seminars, workshops or institutes (group viewing with discussion): One-half point per direct hour of viewing with additional points for discussion, not to exceed seven points.

(14) Student supervision, Level I and Level II Fieldwork: One point for 8 hours of supervision.

(15) Doctorate student supervision, OT Experiential level work: One point for 8 hours of supervision

(16) Mentoring; as defined in OAR-339-010-0005(5): One point for every eight hours contract mentoring with documentation. Points may be obtained for both the mentor and the mentee.

(17) Professional leadership on a Board or Commission relating to OT – Volunteer services to organizations, populations, and individuals that advance the reliance on and use of one's occupational therapy skills and experiences to the volunteer setting or experience: 10 hours equal two points. Up to four points a year with documentation.

(18) Re-Entry Supervisors: Therapists providing supervision under OAR 339-010-0016: One point for 8 hours. **NOTE: There is a new requirement for Pain Management due within 2 years; see the web site.**