## ARKANSAS BOARD OF DISPENSING OPTICIANS

Post Office Box 627 | Helena, AR 72342 Fax Line: (870) 572-2847

RENEWAL FORM FOR: LICENSED DISPENSING OPTICIAN APPRENTICE DISPENSING OPTICIAN

- 1. Please type or print clearly.
- 2. Answer all Questions
- Do not duplicate addresses. Your home address, business and/or employer's address must be included on this renewal form. PLEASE USE THE EMAIL ADDRESS YOU WANT YOUR BOARD MAIL TO BE SENT.
- 4. Each renewal application must be accompanied by a check or money order in the amount of \$60.00 (sixty dollars), payable to the Arkansas State Board of Dispensing Opticians and a 2" X 3" colored photo. If the photo is too large to be used on the badge, or has been laminated once. Your application will be returned.
- 5. Pursuant to Ark. Code Anno. § 17-89-308 (b), you must include proof of FOUR (4) hours of live continuing education credits obtained during July 1, 2021and June 30, 2022. YOU MUST ENCLOSE THE PROOF OF ATTENDANCE SLIP THAT YOU WERE GIVEN AT THE MEETING YOU ATTENDED TO RECEIVE THESE HOURS. THIS IS THE ONLY PROOF OF EDUCATION FORM THAT WILL BE ACCEPTED.
- 6. The effective dates of the renewal badge are July 1, 2022, through June 30, 2023. Your renewal application, 2" X 3" colored photo, and \$60.00 (sixty dollars) payment must be postmarked or received by the Board Office no later than **June 10, 2022**. Upon verification of your renewal applicant, fee payment and continuing education hours, a renewal badge will be mailed to the home address listed on your renewal application. You must wear this badge any time you are working as optician July 1, 2022 June 30, 2023. YOUR BADGE WILL NOT BE RENEWED IF YOUR QUARTERLY SUPERVISION REPORTS ARE NOT ON FILE.
- 7. If you fail to complete renewal of your license before July 1-your certificate is INVALID and you MAY NOT DISPENSE EYEWEAR in the State of Arkansas. To do so will be considered to be practicing without a license.
- 8. Your renewal application must be received (or postmarked) with renewal fee no later than June 10, 2022. If your renewal application is postmarked after June 10, 2022 and is received in the Board Office after June 30, 2022, the following penalties apply and must be paid prior to renewal of you license. If you know your registration is late, please include the penalty payment with your application fee. Late penalties will be strictly enforced. To avoid late penalty the Board Office must receive your completed renewal application and fee by June 30, 2022.

Payment Received: July 1 – July 31, 2022 ADD \$25.00
August 1 – August 31, 2022 ADD \$50.00

September 1 – September 30, 2022 ADD \$75.00

- 9. Pursuant to Board Rule 11.9 effective July 1, 2005, if said licensed, registered, or apprentice certificate is not renewed and the penalty paid by September 30, 2022, the licensed, registered, or apprentice certificate will become inactive. You MAY NOT DISPENSE EYEWEAR in the State of Arkansas. To do so will be considered to be practicing without a license. An inactive license may be subject to reinstatement for a period of two (2) years pursuant to Board Rule 11.9.4.
- 10. If your method of payment is returned from the State Treasury for any reason, you will be considered dispensing without a license and the late penalties will apply along with a returned check fee.

RETURN APPLICATION TO: Arkansas State Board of Dispensing Opticians

Post Office Box 627 Helena, Arkansas 72342

2022-2023 RENEWAL APPLICATION  You are applying to renew your certification as a(n):								
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( ) Registered ( ) Apprentice Optician								
Certificate Number Date of Issue								
(STREET and APT # o	r P. O. BOX)							
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IF YOU ARE A LICENSED OR APPRENTICE OPTICIANS WH	O ARE WORKING	•		AES AND CEDTIE			
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IF YOU ARE AN APPRENTIC OR REGISTERED OPTICIAN	•				UMBERS OF <sup>-</sup>	THE LICENSED	
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Location 2: If you work  Name of Business:  Name of Business Owner/Ti						se with renewal	
	(FIRST)	(MIDE	DLE)	(LAST)	(Title)	<u> </u>	
Name of Supervisor/Title: _	(FIRST)	(MID	DDLE)	(LAST)	(Title)		
Business Physical Address:							
Business Mailing Address: _	(CITY)	(STATE)	(ZIP)				
Business Phone: () _	(CITY)	(STATE) Busines	(ZIP) ss E-Mail:				
AFFIDAVIT FOR LICE  I, the undersigned form submitted for purpose Anno. § 17-89-101 et sequented that pursuant to the Secure gistration or apprentice apply.  (Signature of applications)	applicant for rese of renewal control is true and control is true and control is the second to me	enewal of licen of my licensure rect. I further Rule of the	e, registration understand t Arkansas Bo ended or rev	n, or apprentice that if the inforr pard of Disper	eship pursua nation is not Ising Opticia	ant to Ark. Code true and correct ans any license,	