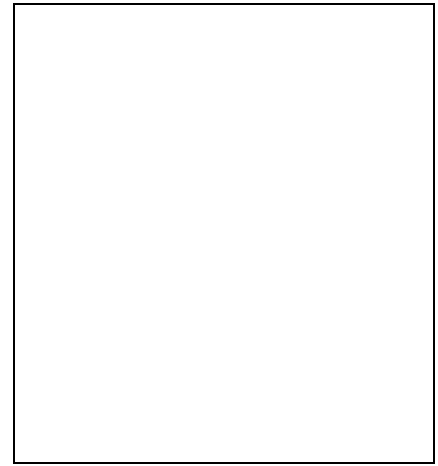




Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
Board of Examiners in Optometry
P.O. Box 110806, Juneau, Alaska 99811-0806
Phone: (907) 465-2580 * E-mail: license@alaska.gov
Website: www.commerce.state.ak.us/occ/popt.htm

BIENNIAL OPTOMETRY LICENSE RENEWAL
January 1, 2011 – December 31, 2012



IT IS TIME TO RENEW YOUR OPTOMETRY LICENSE

Your license to practice as an Optometrist in the State of Alaska lapses after December 31, 2010. There is no grace period to practice on a lapsed license. It is illegal for you to practice or offer to practice in Alaska as an Optometrist if your license has lapsed.

RENEWAL DUE DATE - If you have met the continuing competency requirements (see reverse), complete this form and return with the appropriate fee for processing. The processing time for correct and completed renewal applications is three to four weeks after receipt. Plan accordingly and submit your form ASAP, to ensure processing by the lapse date of December 31, 2010.

CHECK APPROPRIATE LICENSE STATUS BOX:

- Active License \$200.00 (License Numbers 1 - 293)
Prorated License \$100.00 (License Number 294 and higher)
Military Exemption (NO FEE - See qualifications on page 3)
Retired License (NO FEE - See qualifications on page 4)

NOTE: Optometrists with either no endorsement or DPA endorsement will now be issued a restricted license.

Name: Last First Middle

CORRECTED MAILING ADDRESS (complete only if your address is different than the address label shown above).

Street or P.O. Box City State ZIP Code
Social Security Number: Date of Birth: Daytime Telephone Number:
License Number: E-mail Address:

PROFESSIONAL FITNESS

The following questions must be answered. "Yes" answers may not automatically result in license denial.

SINCE THE DATE OF YOUR LAST APPLICATION FOR AN ALASKA OPTOMETRY LICENSE: YES NO

- 1. Have you had a professional license denied, revoked, suspended, or otherwise restricted, conditioned, or limited or have you surrendered a professional license, been fined, placed on probation, reprimanded, disciplined, or entered into a settlement with a licensing authority in connection with a professional license you have held in any jurisdiction including Alaska and including that of any military authorities or is any such action pending?
2. Have you been convicted of a crime or are you currently charged with committing a crime? For purposes of this question, "crime" includes a misdemeanor, felony, or a military offense, including a conviction involving driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license. "Convicted" includes having been found guilty by verdict of a judge or jury, having entered a plea of guilty, nolo contendere or no contest, or having been given probation, a suspended imposition of sentence, or a fine.
3. Have you experienced or been treated for bipolar disorder, schizophrenia, paranoia, or psychotic disorder, substance abuse, or any other mental or emotional illness which may impair or interfere with your ability to practice optometry?
4. Have you been addicted to, or excessively or illegally used, alcohol or a controlled substance?
5. Have you experienced a physical disability which may impair or interfere with your ability to practice optometry?

If you answered "Yes" to any of the above questions, please explain dates and circumstances on a separate piece of paper, and send any supporting documents that are applicable (court records, etc.). Contact the Division with any questions.

DEA REGISTRATION (see AS 08.72.272(2)(B):

If you have received a DEA Registration, please provide the registration number or attach a copy of the Registration.

DEA Registration Number: _____

CONTINUING COMPETENCY: Your license cannot be renewed unless you have met the continued competency requirements in Article 2 of 12 AAC 48 (see enclosed regulations).

An applicant for renewal of an optometry license for the first time must document completion of at least one-half of the continuing education requirements in this section for each complete calendar year that the applicant was licensed during the concluding license period.

RANDOM AUDIT: The board will audit a percentage of the license renewals. If your license is randomly selected for audit, you will be sent a letter and required to submit certified true copies of documentation and proof that you satisfied the continued competency requirements as you stated on this renewal form. Save your documents for at least four years so you can respond to audits.

STATEMENT OF COMPLIANCE

BY CHECKING THE APPROPRIATE BOX BELOW, YOU ARE CERTIFYING YOUR COMPLIANCE WITH THE CONTINUING COMPETENCY REQUIREMENTS IN ARTICLE 2 OF 12 AAC 48

If your renewal application is POSTMARKED BY DECEMBER 31, 2010, complete this section:

(Read carefully and check the box below that fits your situation.)

LICENSE #s 001-285 - I certify that I have successfully completed 36 contact hours of continuing education, which included at least 24 contact hours of ocular pathology or pharmacology, in accordance with 12 AAC 48 during the concluding licensing period of January 1, 2009 through December 31, 2010. I am aware that no more than three contact hours of credit in practice management is acceptable as continuing education credit.

LICENSE #s 286-293 - I certify that I have successfully completed 18 contact hours of continuing education, which included at least 9 contact hours of ocular pathology or pharmacology, in accordance with 12 AAC 48 during the concluding licensing period of January 1, 2009 through December 31, 2010. I am aware that no more than three contact hours of credit in practice management is acceptable as continuing education credit.

LICENSE #s 294 and above are not required to document proof of continuing education for this renewal only (licensed less than one complete calendar year).

LATE RENEWAL APPLICANTS

If your renewal application is POSTMARKED AFTER DECEMBER 31, 2010, complete this section:

(Read carefully and check the box below that fits your situation)

Even though I am submitting my application after December 31, 2010, I certify that I have successfully completed 36 contact hours of continuing education, which included at least 24 contact hours of ocular pathology or pharmacology, in accordance with 12 AAC 48 during the concluding licensing period of January 1, 2009 through December 31, 2010. I am aware that no more than three contact hours of credit in practice management is acceptable as continuing education credit.

I certify that I did not complete some or all of the continuing competency requirements during the concluding licensing period of January 1, 2009 through December 31, 2010. However, as allowed under 12 AAC 02.965 I successfully completed the required continuing education on or after January 1, 2011 but prior to submitting this renewal application and have attached copies of the certificates verifying I completed this education.

NOTE: If any of the situations described above do not fit your situation, attach a letter of explanation.

CONTINUED ON NEXT PAGE

FULL LICENSE (former TPA Endorsement):

You must have successfully completed, in the four-year period immediately before the date of application for renewal of the endorsement:

- (i) eight hours of continuing education in the use and prescription of pharmaceutical agents that meets the requirements of 12 AAC 48.200(b) or (c); and
- (ii) seven hours of continuing education in the injection of nontopical therapeutic pharmaceutical agents that meets the requirements of 12 AAC 48.200(b) or (c).

(Note: The continuing education hours used to satisfy the requirements of this paragraph may be included in the total continuing education hours required for renewal of a license.)

<p>I am renewing my full license and certify that within the four-year period immediately preceding the date of application for renewal,</p> <p><input type="checkbox"/> I successfully completed eight hours of continuing education in the use and prescription of pharmaceutical agents.</p> <p><input type="checkbox"/> I successfully completed seven hours of continuing education in the injection of nontopical therapeutic pharmaceutical agents.</p> <p>If proof of these hours are not already on file with the board, you must attach copies of the required certificates.</p>
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All applicants must sign for renewal and check applicable boxes.

By my signature below, I certify that the information furnished in this application is true and correct. If audited, I agree to provide documentation that verifies I meet the Continuing Education requirements as claimed.

SIGN HERE 

Applicant's Signature



Date: _____

Alaska Statute (AS) 08.72.181(c) requires that you provide your office address.

MAIN OFFICE ADDRESS:

WARNING: Falsification or misrepresentation of any item or response in this application, or any attachment hereto or falsification or misrepresentation of documents to support this application, is sufficient grounds for denying, revoking, or otherwise disciplining a license or permit to practice optometry in the state of Alaska.

***Please sign this form and submit it by mail.
Faxed forms will not be accepted.***

NAME CHANGE - If you have had a legal name change since your last license was issued, enclose a certified true copy of the legal document (marriage certificate, divorce decree, etc.) as proof of the change.

EXPIRED LICENSES - There is no "inactive" license status. If you choose not to renew your license before it expires, you may renew the license at a later date only after satisfying the requirements of AS 08.72.181, Article 2, and Article 4 of 12 AAC 48. Licenses which have expired more than five years cannot be renewed.

SOCIAL SECURITY NUMBERS - In accordance with AS 08.01.100, the department is not authorized to renew a license unless the licensee's social security number has been provided to the department.

PAYMENT OF CHILD SUPPORT AND STUDENT LOANS - If the Alaska Child Support Enforcement Division has determined that you are in arrears on child support, or if the Alaska Commission on Post-Secondary Education has determined you are in loan default, you may be issued a nonrenewable temporary license valid for 150 days. Contact Child Support Services at (907) 269-6900 or the Post-Secondary Education office at (907) 465-2962 or 1-800-441-2962 to resolve payment issues.

PUBLIC INFORMATION - Please be aware that all information on this renewal form will be available to the public, unless required to be kept confidential by state or federal law. Licensee information, including mailing address, is available on the division's website under "License Search."

BUSINESS LICENSES - Renewal applications for business licenses will be mailed separately. For more information about business licenses, call (907) 465-2550 or visit the website at www.commerce.state.ak.us/occ/home_bus_licensing.htm

MILITARY EXEMPTION - If you are serving in the United States Military and **ONLY** practice optometry while in the discharge of official duties, you may renew your license without paying a FEE. Under this military exemption, you may not practice optometry unless you are acting as a military optometrist. **TO QUALIFY FOR THIS EXEMPTION, YOU MUST SUBMIT A COPY OF YOUR CURRENT ORDERS.**

Sec. 08.72.185. RETIRED LICENSE STATUS. (a) On retiring from practice and on payment of an appropriate one-time fee, a licensee in good standing with the board may apply for the conversion of an active or inactive license to a retired status license. A person holding a retired status license may not practice optometry in the state. A retired status license is valid for the life of the license holder and does not require renewal. A person holding a retired status license is exempt from license renewal requirements of AS 08.72.181.
(b) A person with a retired status license may apply for active licensure. Before issuing an active license under this subsection, the board may require the applicant to meet reasonable criteria, as determined under regulations of the board.

CONTINUING EDUCATION REGULATIONS

Section

- 200. License renewals and continuing education**
- 210. Hours of continuing education required**
- 220. Report of continuing education**

12 AAC 48.200. LICENSE RENEWALS AND CONTINUING EDUCATION. (a) In order to be approved by the board, an applicant for renewal of a license must pay the appropriate renewal fee and submit evidence of completing continuing education courses, related to the practice of optometry, as specified in (b) or (c) of this section within the two-year renewal period as specified in 12 AAC 48.210.

(b) The following continuing education courses, if related to the practice of optometry, are accepted by the board for renewal of a license to practice optometry:

(1) education courses offered at the American Optometric Association (AOA) Convention or offered at any American Optometric Association affiliate state association convention;

(2) seminars held by committees of the AOA or organized regional Optometric Extension Program Foundation seminars for educational purposes;

(3) postgraduate courses offered by recognized schools or colleges of optometry;

(4) postgraduate correspondence courses, except that no more than nine hours of continuing education credits may be claimed in a single licensing renewal period;

(5) courses approved by the Council on Optometric Practitioner Education (COPE).

(c) Other continuing education courses not listed in (b) of this section may be approved by the board upon written request of the licensee at least 30 days before commencement of the program. The request must include the following information:

(1) name and address of organization sponsoring courses;

(2) course title and outline of subject matter to be covered;

(3) instructors name and credentials; and

(4) location and dates of the course.

12 AAC 48.210. HOURS OF CONTINUING EDUCATION REQUIRED. (a) An applicant for renewal of an optometry license,

(1) for a biennial licensing period that begins on or after January 1, 2009, must document at least 36 contact hours of continuing education credit that meets the requirements of 12 AAC 48.200, and that was completed during the concluding licensing period;

(2) for a biennial licensing period that begins before January 1, 2009, must document at least 24 contact hours of continuing education credit that meets the requirements of 12 AAC 48.200, and that was completed during the concluding licensing period.

(b) Continuing education credit received under (a) of this section,

(1) for a biennial licensing period that begins on or after January 1, 2009, must include at least 24 contact hours of ocular pathology or pharmacology;

(2) for a biennial licensing period that begins before January 1, 2009, must include at least 12 contact hours of ocular pathology or pharmacology.

(c) No more than three contact hours of credit in practice management is acceptable as continuing education credit under (a) of this section for each license period.

(d) An applicant for renewal of an optometry license who also seeks renewal of a

(1) pharmaceutical agent prescription and use endorsement issued under AS 08.72.175(a) and 12 AAC 48.025

(A) must submit official verification of having successfully completed, in the four-year period immediately before the date of application for renewal of the endorsement,

(i) eight hours of continuing education in the use and prescription of pharmaceutical agents that meets the requirements of 12 AAC 48.200(b) or (c); and

(ii) seven hours of continuing education in the injection of nontopical therapeutic pharmaceutical agents that meets the requirements of 12 AAC 48.200(b) or (c); and

(B) may include continuing education hours used to satisfy the requirements of this paragraph in the total continuing education hours required under (a) and (b) of this section for renewal of a license;

(2) pharmaceutical agent use endorsement issued under AS 08.72.175(c) and 12 AAC 48.021

(A) must document the completion of at least 12 contact hours of ocular pathology or pharmacology that was completed during the concluding licensing period; and

(B) may include continuing education hours used to satisfy the requirements of this paragraph in the total continuing education hours required under (a) and (b) of this section for renewal of a license.

(e) An applicant for renewal of an optometry license for the first time must document completion of at least one-half of the continuing education requirements in this section for each complete calendar year that the applicant was licensed during the concluding license period.

12 AAC 48.220. REPORT OF CONTINUING EDUCATION. (a) An applicant for renewal of a license to practice optometry shall submit, on a form provided by the department, a statement of the continuing education instruction required by 12 AAC 48.200 – 12 AAC 48.220 that the applicant has completed during the concluding license period.

(b) Falsification of any written evidence submitted under this section or 12 AAC 02.960 is unprofessional conduct and constitutes grounds for license reprimand, revocation, or suspension.

- 12 AAC 48.900. REINSTATEMENT OF A LAPSED LICENSE.** (a) If a license lapses for any reason, the lapsed license holder is prohibited under AS 08.72.110 from the practice of optometry in Alaska until the license is reinstated by the board.
- (b) A license that has been lapsed for less than two years will be reinstated by the board upon submission of
- (1) the required fees established in 12 AAC 02.105 and 12 AAC 02.300; and
 - (2) documentation that all continuing education requirements of 12 AAC 48.200--12 AAC 48.220 have been met.
- (c) A license that has been lapsed for two years but less than five years will, in the board's discretion, be reinstated, if the applicant submits
- (1) a new, completed application as required by 12 AAC 48.011;
 - (2) the fees required by 12 AAC 02.105 and 12 AAC 02.300 for the entire period the license has been lapsed;
 - (3) evidence of completion of all continuing educational requirements in 12 AAC 48.200--12 AAC 48.220 that would have been required to maintain a current license for the entire period the license has been lapsed;
 - (4) a statement of the dates and places of employment after the license lapsed;
 - (5) verification of all optometry licenses held in other states, if any, for the entire period the Alaska license has been lapsed, and a signed statement from a licensing official from each of those states which verifies that no restrictions have been placed on the license and that no disciplinary sanctions have been taken against the licensee; and
 - (6) if the applicant is, or has ever been, employed as an optometrist with a federal agency, verification of the applicant's current employment status and disciplinary history from each federal agency where the applicant is, or has been, employed as an optometrist.
- (d) In accordance with AS 08.01.100(d), a license that has been lapsed for five years or more is considered permanently lapsed, and the former licensee must apply for a new license under AS 08.72 and this chapter.

NOTIFICATION OF PROPOSED REGULATION CHANGES

If you would like to receive notice of all proposed Board of Examiners in Optometry regulation changes, please send a written request adding your name to the Board of Examiners in Optometry Interested Parties List to:

REGULATIONS SPECIALIST
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
P.O. Box 110806, Juneau, Alaska 99811-0806



State of Alaska
 Department of Commerce, Community, and Economic Development
 Division of Corporations, Business and Professional Licensing
 PO Box 110806, Juneau, Alaska 99811-0806
 Phone: (907) 465-2550
 Fax: (907) 465-2974

OFFICE USE ONLY

CREDIT CARD PAYMENT

For security purposes, please **do not email or fax** credit card information. Mail this form with the completed renewal to the Division. Completion of this form is not proof of payment until the division processes the information contained herein. If any information on this form is illegible, the form will be rejected. Please print.

Name of Applicant or Licensee: _____
Corporate or Individual (first, middle, last)

License Number (if applicable): _____

Type of License: _____

I wish to make payment by credit card for the following (check all that apply):

- | | |
|---|---------------------|
| <input type="checkbox"/> Application fee | Amount |
| <input type="checkbox"/> License (or renewal) fee | _____ |
| <input type="checkbox"/> Fine | _____ |
| <input type="checkbox"/> Other (specify): _____ | _____ |
| | Total: _____ |

Print Name on Credit Card: _____

Complete Mailing Address: _____

Telephone Number: _____

Email Address (optional): _____

Credit Card Type (check one): VISA MASTERCARD

Signature of Credit Card Holder: _____

Card Number: _____ **Expiration Date:** _____

The bottom section of this form will be destroyed upon processing of the payment.