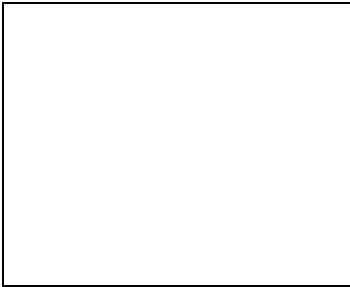




Alaska Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
P.O. Box 110806, Juneau, Alaska 99811-0806
Phone: (907) 465-2695 ★ E-mail: license@alaska.gov
Website: www.commerce.state.ak.us/occ/pnat.htm



BIENNIAL NATUROPATH LICENSE RENEWAL
April 1, 2008 - March 31, 2010

BIENNIAL RENEWAL FEE: \$470

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

License No.: \_\_\_\_\_

YOUR LICENSE TO PRACTICE NATUROPATHY IN THE STATE OF ALASKA EXPIRES ON MARCH 31, 2008; THERE IS NO GRACE PERIOD TO PRACTICE ON A LAPSED LICENSE. By law, it is illegal for you to practice or offer to practice naturopathy in Alaska if your license has lapsed. To renew your license for the period (April 1, 2008–March 31, 2010), return this signed application to the above address with a check or money order payable to the State of Alaska. This is the only renewal notice you will receive. An incomplete application or insufficient fee will result in your renewal being rejected.

RENEWAL DUE DATE The processing time for correct and completed renewal applications is three to four weeks after receipt. Plan accordingly and submit this renewal application as soon as possible for renewal processing before March 31, 2008.

NAME CHANGE If you have had a legal name change since your last license was issued, submit a completed and notarized change of name form (available upon request or on division website) and a copy of the legal document (marriage certificate, divorce decree, etc.) as proof of the change.

EXPIRED LICENSES There is no "inactive" license status. A license lapsed less than five years will be renewed if the applicant submits a complete renewal form and pays the renewal fees for the current renewal period. Licenses which have expired more than five years cannot be renewed.

SOCIAL SECURITY NUMBERS AS 08.01.100 requires that a U.S. Social Security Number be on file with the division before a professional license is renewed for an individual.

PAYMENT OF CHILD SUPPORT AND STUDENT LOANS If the Alaska Commission on Postsecondary Education has determined you are in loan default, or if the Alaska Child Support Services Division has determined you are in arrears on child support, you will be issued a nonrenewable, temporary certificate valid for 150 days. Contact Postsecondary Education at (800) 441-2962 or (907) 465-2962 or Child Support Services at (907) 269-6657 if your last name begins with A through M; contact (907) 269-6845 if your last name begins with N through Z, or 1-800-478-3300 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 addresses, is available on the division's website at www.commerce.state.ak.us/occ under "Professional License Search."

BUSINESS LICENSES Renewal applications for business licenses are mailed separately. For more information about business licenses, call (907) 465-2550.

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

Daytime Telephone Number: \_\_\_\_\_ License Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

E-mail: \_\_\_\_\_

**PROFESSIONAL FITNESS** – The following questions must be answered. “Yes” answers may not automatically result in license denial. If you answer “Yes” to any of the questions, please explain dates and circumstances on a separate, signed and dated piece of paper, and send any supporting documents that are applicable (court records, etc.).

Since the date of your last application for an Alaska naturopath license:

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| 1. Has your license been denied, revoked, suspended, surrendered, stipulated, placed on probation, or been the subject of any restriction, censure, reprimand, or other disciplinary action in any jurisdiction? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you been convicted of any criminal offense other than a minor traffic violation (convictions include “suspended imposition of sentence”)?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you experienced, or been diagnosed with, or been treated for, bipolar disorder, schizophrenia, paranoia, psychotic disorder, substance abuse, depression (except for reactive or situational depression), or any other mental or emotional illness? ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you been or are you addicted to, excessively used, or misused, alcohol, narcotics, barbiturates, or habit-forming drugs? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Have you experienced or do you have a physical disability or physical illness which may impair or interfere with your ability to practice as a naturopath? .....   | <input type="checkbox"/> | <input type="checkbox"/> |

Please be advised that all information provided in the renewal application will be available to the public unless required to be kept confidential by state or federal law.

**I certify that the information contained in this application is true and correct.**

Sign Here



\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date

**WARNING:** The department may deny, suspend, or revoke the license of a person who has obtained or attempted to obtain a license to practice as a naturopath by fraud or deceit. The person may also be subject to criminal charges for perjury or unsworn falsification. (AS 11.56.210 and .230.)

**NOTIFICATION OF PROPOSED REGULATIONS CHANGES**

If you would like to receive notice of all proposed Naturopath regulation changes, please send a written request adding your name to the Naturopath 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**