

Chiropractic Office Phone: _____ Fax: _____

Please answer *each* of the following questions. All responses marked “YES” must be explained in detail on a separate sheet.

YES NO

- Have you ever been addicted or dependent on alcohol or any drug or illegal substance?
- Has any state licensing, certification or disciplinary board or comparable body in any federal, state, municipality, or military branch taken any action against any of your licenses, certifications or registrations?
- Are there outstanding complaints, investigations, charges, or allegations pending against any of your licenses, certifications, or registrations?
- Do you have a physical or mental illness or disability that impairs your ability to practice?
- Have you ever been arrested or pled guilty, nolo contendere, no contest, or been convicted or received probation before judgment for any criminal act, including DWI or DUI?
- Has any hospital, clinic, HMO, managed care organization, other care entity or employer denied you privileges or employment or denied application for employment, or did not renew your contract due to incompetence, unprofessional conduct, impairment, drug or alcohol abuse or addiction?
- Have you ever applied for and been denied any license, certificate, or diploma to be issued by a professional or government agency or board?
- Have you ever held a license, certification, or registration to practice as a chiropractic assistant in any other state?
- Has a malpractice civil suit or action ever been filed against your license, or has a claim been made against you, or a settlement or award been made against you?

List the name, address and phone number of a licensed chiropractor who can attest to your moral character. The chiropractor listed here must complete, sign, and return the Certificate of Moral Character (form on website).

Chiropractor Name: _____

Address: _____

Phone: _____

Please provide 2, passport style (2"x2" or 2"x3"), color, head and shoulder photos on a solid background. Full body shots are not acceptable. Affix one photo here and attach the other to the upper right corner of first page of this application.

I hereby certify that I am the individual cited in the foregoing application and that the photos attached hereto are a true likeness of me.

Applicant

Date

NOTARY SEAL (*required*)