



KENTUCKY BOARD OF PHYSICAL THERAPY

Steven L. Beshear
Governor

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<http://pt.ky.gov>

Rebecca E. Klusch
Executive Director

REINSTATEMENT TO DO LIST

LICENSE LAPSED 3 YEARS OR LESS:

1. _____ Submit completed Reinstatement Form
2. _____ Submit Reinstatement Fee \$200.00 (money order, cashier or certified check)
3. _____ Submit CHFS approved HIV/AIDS 2 hours Certificate
4. _____ Taken Jurisprudence Examination at <http://pt.ky.gov>
5. _____ List of Continuing Competency on a Tracking Form
6. _____ Proof of Continuing Competency showing contact hours

LICENSE LAPSED MORE THAN 3 YEARS:

1. _____ All of the above
2. _____ Submit a current resume
3. _____ Verification of licensure from all states licensed since KY license lapsed.

If not holding a current credential, additional stipulations may be required.

If you have had a **name change** since your license or certificate lapsed, you must send a copy of the legal document which authorizes that change.

