



Virginia Department of  
**Health Professions**  
Board of Physical Therapy

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## EDUCATIONAL AUTHORIZATION FORM

Submit this form to your school for verification that you are within 60 days of completion of degree requirements from your scheduled examination date and instruct them to mail the completed form directly to the Virginia Board of Physical Therapy.

**NOTE TO APPLICANTS:** This does not replace official transcripts for the application process. This form is required if you have not yet received your degree but are within 60 days of fulfilling the requirements. Licensure will not be issued until official transcripts are received confirming the degree. The Board will not release the test scores until the official transcript is received.

(For graduates of approved programs only)

It is hereby certified that \_\_\_\_\_  
Name of Applicant

is enrolled in \_\_\_\_\_ on \_\_\_\_\_  
Course of Study Enrollment Date

and is within 60 days of completing the degree requirements of \_\_\_\_\_  
Degree

from \_\_\_\_\_  
Name of Institution

on \_\_\_\_\_  
Graduation Date

\_\_\_\_\_  
Signature of Dean or Department Head

\_\_\_\_\_  
Date