Commonwealth of Virginia Department of Professional and Occupational Regulation 9960 Mayland Drive, Suite 400 Richmond, Virginia 23233-1485 (804) 367-8500



Department of Professional and Occupational Regulation

## DISCIPLINARY ACTION REPORTING FORM

This form is to be used by <u>applicants</u> in conjunction with your DPOR license, certification, or registration application. The information requested is in regards to your affirmative response(s) to the question regarding disciplinary actions and should be included with your application package.

This form may also be used by existing DPOR license holders to report any new disciplinary action.

If you did not report any disciplinary actions on your application or do not have any new disciplinary action to report, this form is <u>not</u> required.

This form is to be submitted directly to DPOR/Board Section at the address provided above.

	APPLICANT/LICENSEE									
$\geqslant$	Individual/Business Name:	New Applicant or	Existing License	е						
	Individual Legal Name (As it appears on your government issued ID or other legal documentation.)									
	First (required)	Middle		Last (required)	Generation					
	Business/Sole Proprietor Name									
≻	Profession:									
≻	Virginia License Number (if applicable)									
≻	Provide the last 4 digits of your identification numbers $^{*}$ :									
	Business FEIN	Social Security Number	or 🗌 Virginia D	OMV Control Number:						
	* Use the same identification number $i$	as used on file with DPOR from	n previous applications.							

## **DISCIPLINARY ACTION:**

www.dpor.virginia.gov

<u>Applicants</u> - if you answered "yes" on your license, certification or registration application for being subject to <u>disciplinary</u> <u>action</u> by any (including Virginia) local, state or national regulatory body, <u>complete the following table</u>.

**DPOR Licensee Holders** - if you are reporting a **NEW** *disciplinary action* by any (including Virginia) local, state or national regulatory body, *complete the following table*.

Type of License, Certification, or Registration	License,Certification, or Registration No.	State/Jurisdiction	Reason for Disciplinary Action	Date of Disc. Action	Case Number	Decision (fine, suspension, revocation, etc.)

Provide a certified copy of the final order, decree or case decisions by a court or regulatory agency with lawful authority to issue such order, decree or case decisions.

## SIGNATURE

*I*, the undersigned, certify that the foregoing statements and answers are true, and that I have not suppressed any information that might affect the Board's decision to consider the new disciplinary action reported or to approve my pending application.

Signature

Date