

# ARIZONA STATE BOARD OF PHYSICAL THERAPY

## Application ~ Inactive Status Physical Therapist Assistant

A.R.S. § 32-2031 (A): The board shall place a licensee or certificate holder on inactive status and waive the continuing competence requirements if a licensee or certificate holder presents a written affidavit to the board that the licensee or certificate holder is not currently engaged in the practice of physical therapy or working as a physical therapist assistant in this state, is in good standing with the board and has paid all fees required by this chapter.

I, \_\_\_\_\_, am an inactive  
**Certified Physical Therapist Assistant** in the state of Arizona. I hold inactive certificate number \_\_\_\_\_.

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_  
Number/Street/Apartment Number

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Area Code \_\_\_\_\_ Telephone number \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I affirm that my Arizona PTA certificate is in good standing with the Board.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I affirm that I understand that I may not engage in work as a PTA in the state of Arizona.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit via eLicensing Portal Only (<https://elicense.az.gov/>)