

**ARIZONA STATEMENT OF CITIZENSHIP  
AND ALIEN STATUS FOR STATE PUBLIC BENEFITS**  
Professional License and Commercial License  
**Arizona State Board of Physical Therapy**

Form 1: LONG FORM APPLICANT STATEMENT (revised) REQUIRING SUBMISSION OF  
DOCUMENTATION OF STATUS

Arizona Revised Statute §41-1080 and A.A.C. R4-24-201(A)(3) requires, in general, that a person applying for a license, certificate or registration must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

**Directions: All applicants must complete Sections I, II, III and V. Applicants educated outside the United States must complete section IV. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal. (A.R.S. §32-2022(B)(5))**

**SECTION I –APPLICANT INFORMATION**

APPLICANT’S NAME (Print or type) \_\_\_\_\_ DATE \_\_\_\_\_

**Note: If you are submitting a birth certificate to prove citizenship and your name is different than what is on the birth certificate, please include the document that resulted in the name change – ie marriage license, divorce decree.**

TYPE OF APPLICATION. (check one): \_\_\_\_\_ INITIAL APPLICATION \_\_\_\_\_ RENEWAL

TYPE OF LICENSE \_\_\_\_\_ LICENSE # \_\_\_\_\_

**SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION**

**Directions:** Attach a legible copy of the front and the back (if any) of a document that demonstrates U.S. citizenship or nationality from the list in Section III. Name of document provided: \_\_\_\_\_

A. Are you a citizen or national of the United States? (check one)       Yes    No

**SECTION III – DOCUMENTATION**

**Directions:** To be completed by all applicants. Attach a legible copy of the front and the back (if any) of a document from the list below. A.R.S. § 41-1080(A).

1. An Arizona driver license issued after 1996 or an Arizona nonoperating identification license.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
4. A United States certificate of birth abroad.
5. A United States passport.
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

In accordance with A.R.S.§41-1080(E) if you provide a form of documentation listed in A.R.S. §41-1080(A) that does not have a photo, you must submit a copy of a government issued photo ID along with the document.

**SECTION IV – PROOF OF LEGAL STATUS TO WORK IN THE UNITED STATES**  
**Foreign Educated Physical Therapist Applicants Only**

**Directions:** Applicants for licensure as a physical therapist who were educated outside of the United States must provide proof of legal authorization to reside and to seek employment in the United States in accordance with A.R.S. §32-2022(B)(5). In accordance with A.A.C. R4-24-203(A)(6):

1. Have you been issued a work visa to allow you to seek employment in the United States? Circle Yes or No
2. If yes, attach a copy of the front and back of your work visa. Your application is not complete without the required documentation.
3. If you have not yet received the work visa you cannot be issued a license until a copy of your work visa is provided. Please sign below indicating you understand your application is not complete until the required documentation has been received.
  - a. I, \_\_\_\_\_ understand my application for licensure as a physical therapist is Arizona is not complete until proof of legal authorization is provided.

**SECTION V – DECLARATION**

**All applicants must complete this section.** I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
TODAY'S DATE