

Douglas A. Ducey  
Governor



Charles D. Brown  
Executive Director

**ARIZONA STATE BOARD OF PHYSICAL THERAPY**

4205 N. 7<sup>th</sup> Ave, Ste 208 ♦ Phoenix, AZ 85013  
(602) 274 - 0236 ♦ Fax (602) 274 - 1378  
[www.ptboard.az.gov](http://www.ptboard.az.gov)

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**License Verification**  
Request by Arizona Licensed PT / PTA

This document is not to be faxed.

Name of Licensee/Certificate Holder: \_\_\_\_\_

License / Certificate Number: \_\_\_\_\_ Status: (circle one) Active / Inactive

Current Home Address: \_\_\_\_\_  
Street/PO Box City State Zip

Current Home Telephone Number: ( ) \_\_\_\_\_

Current Business Name: \_\_\_\_\_

Current Business Address: \_\_\_\_\_  
Street/PO Box City State Zip

Current Business Telephone Number: ( ) \_\_\_\_\_

**Send the verification to: (state board, university, insurance agency or credential agency, etc.)**

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**Payment Information: A fee of \$15.00 payable to the Arizona State Board of Physical Therapy is required. It may be sent as a personal, business, or cashier's check or money order. Verifications will be mailed within 5 working days.**

**DO NOT FAX THIS DOCUMENT ~ Mail request and fee to:**

**Arizona Board of Physical Therapy  
4205 N. 7<sup>th</sup> Ave, Ste 208  
Phoenix, AZ 85013**