

MARYLAND BOARD OF OCCUPATIONAL THERAPY PRACTICE
Spring Grove Hospital Center • Bland Bryant Building, 4th Floor • 55 Wade Avenue • Baltimore, MD 21228
Phone: 410-402-8556

Notice of Mailing List

The information collected on the license application form and the license renewal form is collected for the purpose of licensure under the Maryland Health Occupations Annotated Code Title 10. Failure to provide the information may result in denial of your application. You have the right to inspect, amend and correct this information. The Board may permit inspection of this information, or make it available to others, only as permitted by Federal and State law. The Board may sell or provide a list of licensees' names and addresses to professional associations and other entities. Under the Maryland Public Information Act, Maryland State Government Code Annotated 10-617, you may request in writing that your name be omitted from such lists.

All documents may be submitted to the Board office via:

- 1) **Email:** mdotboard.user@maryland.gov
- 2) **Fax:** (410) 402-8561
- 3) **US Mail:** MD Board of Occupational Therapy • Spring Grove Hospital Center • 55 Wade Avenue
Bland Bryant Building, 4th Floor • Baltimore, MD 21228
- 4) **Online Application:** https://health.maryland.gov/botp/online_services.aspx

APPLICANT'S CHECKLIST

	YES	NO
1. Complete your application form (questions 1-30) or complete online application	1. <input type="checkbox"/>	<input type="checkbox"/>
2. Submit payment payable to MBOT (check or money order) or pay online with credit card (Visa and Mastercard are accepted.)	2. <input type="checkbox"/>	<input type="checkbox"/>
3. Complete fingerprinting for criminal history records check and send in the receipt with your application or upload the receipt to your online application.	3. <input type="checkbox"/>	<input type="checkbox"/>
4. Print verifications for any other states/countries in which you have been licensed. Send copies along with your application or upload them to your online application.	4. <input type="checkbox"/>	<input type="checkbox"/>
5. NBCOT CERTIFIED APPLICANTS ONLY: print verification of your certification and send it along with your application or upload it to your online application.	5. <input type="checkbox"/>	<input type="checkbox"/>
6. CONTINUING COMPETENCY REQUIREMENT (CCR) Compliance Report: A. Waived if NBCOT Certification is current; B. If NBCOT certification is not current, include applicable documentation from the date you sign the application or upload documents to your online application.	6. <input type="checkbox"/>	<input type="checkbox"/>
7. Download the Jurisprudence Examination from http://health.maryland.gov/botp and submit the exam answer sheet to the Board office, or complete the Jurisprudence Exam online.	7. <input type="checkbox"/>	<input type="checkbox"/>
8. TEMPORARY LICENSE APPLICANTS ONLY: Request Confirmation of Examination Registration and Eligibility to Examine Notice from NBCOT.	8. <input type="checkbox"/>	<input type="checkbox"/>