



APPLICATION CHECKLIST AND INSTRUCTIONS FOR **DIRECT ACCESS** CERTIFICATION

SUBMIT THE FOLLOWING:

- ☐ APPLICATION – This application will not be considered until all sections have been completed.
- ☐ FEE – All fees are non-refundable.
- ☐ VERIFICATION OF LICENSURE – Provide a license verification from any jurisdiction (United States, its territories, the District of Columbia, or Canada) in which you have ever held a license, including expired, inactive, and current licenses.
 - If the licensing jurisdiction provides online license verifications, you can provide documentation printed directly from the jurisdiction's website.
 - If the licensing jurisdiction does not provide online verification, you must contact the jurisdiction directly to obtain a license verification.

All verifications must include the following information: licensee name, license number, issue date, expiration date, and any applicable disciplinary action documentation.

If applying for certification with **qualifications based on education** (see 18VAC112-20-81), you must submit the following:

- ☐ TRANSCRIPT – Submit official transcripts, which must be received directly from your college or university to include the date of graduation and completion of a transitional program in physical therapy.

NOTE: You are **not** required to apply for Direct Access Certification if you were initially licensed as a Physical Therapist in Virginia with a Doctorate of Physical Therapy (DPT) from a program approved by the [American Physical Therapy Association](http://AmericanPhysicalTherapyAssociation) (APTA).

If applying for certification with **qualifications based on experience** (see 18VAC112-20-81), you must submit the following:

- ☐ EMPLOYMENT VERIFICATION - If applying by experience, you must provide originally signed documentation directly from your employer on company letterhead verifying the dates of employment and hours worked in physical therapy in another United States jurisdiction or Canada for at least three years of post-licensure, active practice.
- ☐ CONTINUING EDUCATION – You must submit copies of certificates for the completion of 15 hours of continuing education in medical screening or differential diagnosis, including the passage of a post-course examination.

GENERAL INFORMATION ABOUT THE APPLICATION PROCESS

1. Applications received without the required processing fee will be returned to the sender.
2. Documentation may be submitted electronically to ptboard@dhp.virginia.gov; however, certain information must be submitted from the primary source for items such as official transcripts (through services such as Parchment or eScripts), work experience from employers, and examination scores (directly received from the FSBPT). Documentation related to affirmative answers to the licensure questions must be submitted to the Board in their original format by mail if requested by the Board.
3. Completed applications will be processed within 7-10 business days. Board staff will contact you at the email address provided on your application with a status update.
4. Applications will remain on file with the board for one year from the date of receipt. If, at the end of one (1) year, licensure/certification/registration is not issued, the applicant shall reapply in accordance with the requirements of the Regulations.