

State of Oregon



OREGON BOARD OF OPTOMETRY

APPLICATION FOR EXAMINATION AND LICENSURE

I hereby apply to be considered for licensure as an optometrist by the Oregon Board of Optometry under the standards, qualifications and procedures established under Oregon Revised Statutes 683.

I have requested that a copy of my transcripts be sent to the Oregon Board of Optometry.

I have _____, have not _____, made a previous application to the Oregon Board of Optometry.

NAME: _____ DATE: _____
(Please Print) First M.I. Last

OTHER NAMES USED: _____

SIGNATURE: _____

12. HAS ANY STATE REJECTED YOUR APPLICATION, SUSPENDED OR REVOKED YOUR PROFESSIONAL LICENSE OR CERTIFICATE?

Yes _____ No _____ IF YES, ATTACH EXPLANATION

13. HAVE YOU EVER BEEN CHARGED OR CONVICTED OF A FELONY OR MISDEMEANOR?

Yes _____ No _____ IF YES, ATTACH EXPLANATION

14. HAS DISCIPLINARY ACTION, INVESTIGATION, SANCTION, JUDGEMENT OR INJUNCTION EVER BEEN BROUGHT AGAINST YOU BY A GOVERNMENTAL JURISDICTION, PROFESSIONAL ORGANIZATION, LICENSING AGENCY OR REGULATORY BOARD?

Yes _____ No _____ IF YES, ATTACH EXPLANATION

15. HAVE YOU EVER BEEN THE DEFENDANT IN A CIVIL SUIT CONCERNING ACTIVITIES RELATING TO OPTOMETRY?

Yes _____ No _____ IF YES, ATTACH EXPLANATION

16. ENCLOSE WITH THIS APPLICATION A CHECK OR MONEY ORDER PAYABLE TO THE OREGON BOARD OF OPTOMETRY FOR (Initial License - \$200.00; Endorsement License - \$300.00). THIS APPLICATION FEE IS NOT REFUNDABLE.

MAIL APPLICATION AND FEE TO: OREGON BOARD OF OPTOMETRY
P. O. BOX 13967
SALEM OR 97309-1967

ALL APPLICANTS MUST COMPLETE THE FOLLOWING AFFIDAVIT

I, the undersigned applicant, depose and say that:

- (1) I am the applicant named in the foregoing application;
- (2) I have read the Administrative Rules and Revised Statutes of the State of Oregon relating to admission to the practice of optometry in Oregon and I make this application in accordance with those rules;
- (3) I fully realize that the determination of whether I may be allowed to practice optometry in Oregon depends on the truth and completeness of my answers in this application and the information furnished with it;
- (4) I have read the foregoing application, and the answers which I have given are true and complete;
- (5) I understand that my obligation to furnish complete and accurate information in connection with this application is a continuing one. Therefore, should anything occur or be discovered between the time this application is submitted and the time I am licensed which would change or render incomplete any portion of the information furnished in connection with this application, I will promptly notify the Oregon Board of Optometry of the discrepancy. I will immediately furnish the necessary information to correct or complete my application;
- (6) I will give any further information which may be required in connection with my application;

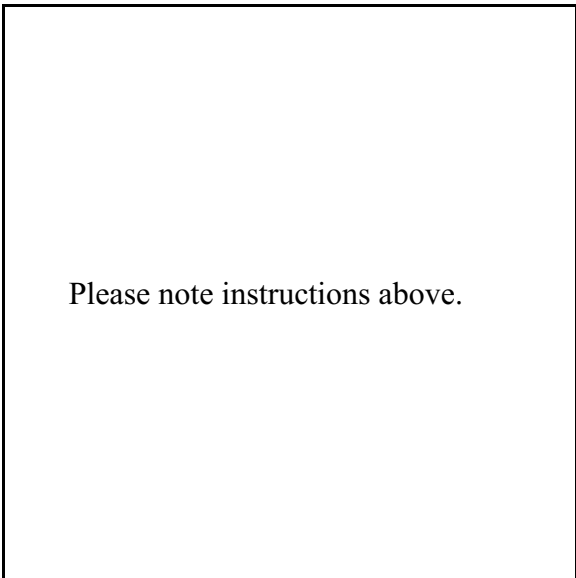
- (7) I hereby authorize the Oregon Board of Optometry or any agent or authorized representative thereof, to make a complete investigation of my character, financial responsibility and general fitness to practice optometry in Oregon;
- (8) I hereby release and exonerate any person or organization supplying requested information in connection with this application, or the investigation discussed in (7) above, from liability of any kind resulting from the investigation or from furnishing information.

DATE: _____ SIGNATURE: _____

PHOTOGRAPH:

Attach, in the space provided for below, a photograph of yourself, size 3" X 3", bust only, taken within the year previous to making application. **Across the photograph, write your name and make acknowledgment before a notary public. The notary's seal of identification must be partially on the photograph paper.** Please be careful not to mar the features.

The attached photograph is a true likeness of myself within the year.



Subscribed and sworn to before me this _____ day of _____, 200__
 State of _____ My commission expires _____

 Notary Public

NOTICE: As part of you application for an initial or renewed professional license you are required to provide your Social Security Number. This is mandatory. The authority for this requirement is Oregon Laws 1997, Chapter 746, section 117 (ORS 25.785) and 42 USC section 666(a)(13). Failure to provide your Social Security Number will be a basis to refuse to issue or renew the license you seek. Your Social Security Number will remain on file with the Board. This record of your Social Security Number will be used as required for reporting to the Oregon Department of Revenue (state taxes), Oregon Department of Justice (child support), National Practitioner Data Bank (NPDB) and Health Care Integrity and Protection Data Bank (HIPDB) pursuant to 45 CAR Part 61 of the Health Care Fraud and Abuse Data Collection Program (these uses are mandatory), and the Association of Regulatory Boards of Optometry (ARBO).

Oregon state professional licensing boards are required by SB 786 (2001 Session) to report to the Legislature on the racial and ethnic makeup of applicants and professionals regulated by the Board. Provision of this information is voluntary. However, we would encourage you to supply this information in order that the Board can more effectively meet its requirements under the law.

applicns.1106wpd

The following definitions are from the U. S. Census Bureau.

CODE: **Race - Bold, underlined, italic print. (White, Black/African American, Asian, etc.)**
Ethnicity - Italic print under the Race headings. (English, Dutch, Irish, Norwegian, Russian, etc)

Race — The concept of race as used by the Census Bureau reflects self-identification by people according to the race or races with which they most closely identify. These categories are sociopolitical constructs and should not be interpreted as being scientific or anthropological in nature. Furthermore, the race categories include both racial and national-origin groups.

White — A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. It includes people who indicate their race as “White” or report entries such as Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish.

Black or African American — A person having origins in any of the black racial groups of Africa. It includes people who indicate their race as “Black, African Am., or Negro,” or provide written entries such as African American, Afro American, Kenyan, Nigerian, or Haitian.

American Indian and Alaska Native — A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment. It includes people who classify themselves as described below.

American Indian — Includes people who indicate their race as “American Indian,” entered the name of an Indian tribe, or report such entries as Canadian Indian, French-American Indian, or Spanish-American Indian.

Alaska Native — Includes of Eskimos, Aleuts, and Alaska Indians as well as entries such as Arctic Slope, Inupiat, Yupik, Alutiiq, Egegik, and Pribilovian. The Alaska tribes are the Alaskan Athabaskan, Tlingit, and Haida.

Asian — A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. It includes “Asian Indian,” “Chinese,” “Filipino,” “Korean,” “Japanese,” “Vietnamese,” and “Other Asian.”

Asian Indian — Includes people who indicate their race as “Asian Indian” or identify themselves as Bengalese, Bharat, Dravidian, East Indian, or Goanese.

Chinese — Includes people who indicate their race as “Chinese” or who identify themselves as Cantonese, or Chinese American. Written entries of Taiwanese are included with Chinese.

Filipino — Includes people who indicate their race as “Filipino” or who report entries such as Philipino, Philippine, or Filipino American.

Japanese — Includes people who indicate their race as “Japanese” or who report entries such as Nipponese or Japanese American.

Korean — Includes people who indicate their race as “Korean” or who provide a response of Korean American.

Vietnamese — Includes people who indicate their race as “Vietnamese” or who provide a response of Vietnamese American.

Cambodian — Includes people who provide a response such as Cambodian or Cambodia.

Hmong — Includes people who provide a response such as Hmong, Laohmong, or Mong.

Laotian — Includes people who provide a response such as Laotian, Laos, or Lao.

Thai — Includes people who provide a response such as Thai, Thailand, or Siamese.

Other Asian — Includes people who provide a response of Bangladeshi, Burmese, Indonesian, Pakistani, or Sri Lankan.

Native Hawaiian and Other Pacific Islander — A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. It includes people who indicate their race as “Native Hawaiian,” “Guamanian or Chamorro,” “Samoan,” and “Other Pacific Islander.”

Native Hawaiian — Includes people who indicate their race as “Native Hawaiian” or who identify themselves as “Part Hawaiian” or “Hawaiian.”

Guamanian or Chamorro — Includes people who indicate their race as such, including written entries of Chamorro or Guam.

Samoan — Includes people who indicate their race as “Samoan” or who identified themselves as American Samoan or Western Samoan.

Other Pacific Islander — Includes people who provided a response of a Pacific Islander group such as Tahitian, Northern Mariana Islander, Palauan, Fijian, or a cultural group such as Melanesian, Micronesian, or Polynesian.

Some Other Race — Includes all other responses not included in the “White,” “Black or African American,” “American Indian and Alaska Native,” “Asian,” and the “Native Hawaiian and Other Pacific Islander” race categories described above. Respondents providing write-in entries such as multiracial, mixed, interracial, or a Hispanic/Latino group (for example, Mexican, Puerto Rican, or Cuban) in the “Some other race” category are included in this category.