

Relocation of Practice Applicant Check List

- _____ \$175.00 Application Fee
- _____ \$175.00 Examination Fee
- _____ Two (2) Passport Photos (affix one to the application and have it notarized)
- _____ Certified Birth Certificate
- _____ Change of Name Documents (If Applicable)
- _____ Military Discharge Papers (If Applicable)
- _____ Chiropractic College Diploma
- _____ Letter of Good Standing or Verification of Licensure (If licensed in another state)
- _____ National Background Check (*Information will be sent to you once we receive your initial application*)

***Diploma needs to be sent directly from the school.**

***Payment for the application and examination must be a Cashier's Check or Money Order. (NO PERSONAL CHECKS ACCEPTED)**

***Notarize signatures that require notarization**