State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board
Occupational Therapy Section

Occupational Therapy Examination Application Instructions

The examination application applies to any person who has already passed the NBCOT certification examination **and** who has never held a license to practice occupational therapy in another U.S. state or territory. Please review rule 4755-3-01 of the Ohio Administrative Code for clarification on the requirements to apply for an Ohio occupational therapist/occupational therapy assistant license by examination.

Applications are reviewed on a weekly basis. All applications must be **FULLY** completed before they are reviewed and a license is issued. If your application remains incomplete for one year from the date the Board receives it, your file will be closed.

You may not practice occupational therapy in Ohio until you receive a license. Please note, all licenses issued for occupational therapists must be renewed by June 30 of odd-numbered years. All licenses issued for occupational therapy assistants must be renewed by June 30 of even-numbered years.

To obtain a license by examination in Ohio, you must complete all of the following:

(This form and instruction sheet is for your personal records.)

Application Fee

- ❑ The application fee is $100.00. Application fees are non-refundable.

Criminal Records Check

- ❑ You must submit fingerprints for a criminal records check completed by the Ohio Bureau of Criminal Identification and Investigation (BCI) and the Federal Bureau of Investigation (FBI).
- ❑ You need both the BCI and FBI records check for initial licensure. By law, the Board cannot complete the processing of your application until it receives the background check reports from BCI and FBI.
- ❑ Under rule 4755-3-14 of the Administrative code, "a new criminal records check will be required if the applicant's criminal records check on file with the Board is greater than six months old based on the date the received the report." As a result, if a license is not issued within 6 months of the date the Board receives the results, the applicant will need to submit new criminal records checks.

Photograph

- ❑ Please staple a passport style photograph of your face taken within the six month period immediately preceding the date of your application. The photo should be 2 x2 inches in size. If the photo is digital, it must be a clear representation and must meet the specifications listed above. For more information please review the *Passport Photograph Guidelines* on the Board's website (http://otptat.ohio.gov).

Jurisprudence Examination

- ❑ You must score a 90% or better to pass the examination. The Ohio OT Jurisprudence Exam can be accessed at https://ohiootptatboard.myicourse.com.

State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board
Occupational Therapy Section

Occupational Therapy Examination Application Instructions

Certification of Entry Level Education or Official Transcript(s)

- ❑ This document must come to the Board directly from your educational institution. Documents received from the applicant will not be accepted.
- ❑ Transcripts may be submitted in lieu of the "Certification of Entry Level Education." This only applies to graduates of ACOTE accredited programs. Transcripts received from the applicant will not be accepted.

Verification of Examination

- ❑ You must provide proof that you passed the NBCOT certification examination. This must come directly from NBCOT (http://www.nbcot.org).

Verification of Licensure

- ❑ You must provide a verification from any jurisdiction in which you currently hold or have ever held a license to practice occupational therapy or another healthcare profession. Jurisdiction means any state, U.S. territory, or foreign country.

Credential Evaluation

A credential evaluation must be completed for any applicant that graduated from a Non-ACOTE accredited program.

- ❑ An evaluation is not required if you were initially certified by NBCOT on or after January 1, 2004.
- ❑ All graduates of non-ACOTE accredited programs initially certified by NBCOT prior to January 1, 2004 must submit a credential evaluation from one of the following credential review agencies. Please contact them directly at:

Educational Credential Evaluators, Inc.	World Education Services, Inc.	International Consultants of Delaware	NBCOT	International Credentialing Associates, Inc.
http://www.ece.org	http://www.wes.org	http://www.icdeval.com	http://www.nbcot.org	http://icaworld.com

Additional Requirements For Individuals Who Graduated From Their Entry Level Occupational Therapy Program Five Or More Years Prior to the Date of This Application

Applicants for initial licensure for examination who graduated from their entry-level occupational therapy program five or more years prior to the date the individual applies to the Section for licensure by examination may be subject to additional requirements including, but not limited to, the following: (1) Submission of proof of completion of twenty hours of continuing education within the two year period immediately preceding the date the application is submitted; (2) Professional development plan; (3) Extended coursework; (4) Retaking and passing the NBCOT certification examination; (5) Mentorship; and (6) Competency-based performance appraisals.

Please refer to the "Limited License Reference Guide" for additional information.

State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board
Occupational Therapy Section

Online Application Instructions

Individuals must submit an online initial license application for occupational therapy, physical therapy, and/or athletic training through the Ohio e-License Center.

The link to the **Online Initial License Application** site is:

https://license.ohio.gov/Applications/default.asp?division=92

After applying online, applicants are required to submit the Certification of Applicant for Online Applications document, in addition to any other supporting materials required as part of the application.

Steps to Licensure

Applicants for licensure by examination should complete these steps about 6-8 weeks before the completion of their entry level OT/OTA program.

Do not wait until you have your NBCOT scores to submit your application.

1. **Candidate completes** all sections of the examination application and submits the fee to the Ohio OTPTAT Board. If you are submitting an online application through the Ohio e-License Center, you must also submit a notarized *Certification of Applicant for Online Applicants* form. Applicants applying online will pay the$100 fee with either a Visa, MasterCard or Discover Card. The Board does not accept American Express Card.

   You can submit an online application by selecting the "On-line Initial License Application" link in the Information menu on the left side of the Board's website.

   When the Board receives your application, you will receive an email that contains the login information to track the status of your application at the "Application Checklist" on the Ohio e-License Center (https://license.ohio.gov). A link to the Ohio e-License Center is available on the Board's website.

2. **Request your entry level OT/OTA program** to submit the *Certification of Entry-Level Education* form directly to the Board office. **The Board will also accept an official transcript from your school.** Forms received from the applicant will not be accepted.

3. **Request verifications from any jurisdiction** where you currently hold *or have ever held* a license, certification or registration to practice occupational therapy or another health care profession. You must request the verification even if the license is expired.

4. **Complete the Occupational Therapy Jurisprudence Exam,** which can be accessed at https://ohiootptatboard.myicourse.com. Information about the Jurisprudence Examination is available on the "Ohio OT Jurisprudence Exam" link.

   Please select the *Ohio OT Jurisprudence Exam for Licensure Applicants* on the Course Catalog and make sure that you request that a transcript be sent.

5. **Request your criminal records checks from the Ohio BCI and the FBI**. Review the *BCI/FBI Criminal Records Check Instructions* document on the Board's website for additional information. Please note that if your license is not issued within 6 months of the date the Board receives the criminal records check results, you will be required to submit criminal records checks. **Therefore, the Board recommends that applicants submit their fingerprints about 4 weeks prior to program completion date**.

6. **If you answered "yes" to any of the Background Questions,** please provide a written statement explaining the incident(s) and what state it occurred in and attach supporting documentation including, but not limited to: *court records, and/or documentation from other state licensing boards*. If you have been convicted of a felony, you must provide "certified" copies of the following court documents: *Indictment, Plea Entry, Disposition, Sentencing Entry, Terms of Parole or Probation, Parole or Probation and Release/Discharge*.

7. **Register and pay to sit for the NBCOT Certification Examination** directly with the National Board for Certification in Occupational Therapy (NBCOT) at https://secure.nbcot.org/nbcot/login/login.aspx. When you register for the NBCOT Certification Exam, please make sure to request NBCOT to send an

Official Score Transfer to Ohio. If you do not request your score to be sent to Ohio, the Board will not receive the results of your exam and will not be able to issue an Ohio license.

8. **The Ohio OTPTAT Board receives your NBCOT score** directly from the NBCOT in accordance with the Examination Scoring Schedule. (**www.nbcot.org/pdf/examination_scoring_calendar.pdf**). If you do not pass the NBCOT Certification Examination on your first try, the Board will keep your application open for one year from the date it was initially received by the Board.

9. **The Ohio OTPTAT Board issues your license to practice once we receive your NBCOT score, provided the rest of your application is complete**. Once your license is issued, you can verify it through the License Lookup/Verification link on the Board's website (https://license.ohio.gov/lookup/default.asp?division=92).

   You cannot legally practice occupational therapy in Ohio until you can verify your license online.

OT/ OTA EXAMINATION APPLICATION CHECKLIST

(Use this checklist to help complete the examination application requirements for Ohio)

Document	You Provide Document	You request, other agency/source provides documentation. It must be mailed directly to our office from the agency/source in their own envelope
Non-refundable application fee of $100.00. Please submit a cashier's check, business check, or money order made payable to "Ohio Treasurer of State." Personal checks or cash will not be accepted.	☐	
Certification of Applicant for Online Applications. This form must be notarized.	☐	
Photograph. Please staple a 2 x 2 inch passport photograph of your full face, front-view, with a plain white or off-white background taken within the six month period immediately preceding the date of your application. Please review the *Passport Photograph Guidelines* document on the Board's website for additional information.	☐	
Certification of Entry-Level Education or Official Transcript. Upon program completion, your program will send this form to the Board. Forms received from the applicant will not be accepted. Transcripts are only permitted from ACOTE accredited programs.		☐ School mails directly to Board
Verification of Licensure. You must provide an official verification from any jurisdiction in which you hold or have ever held a license, certification, or registration to practice occupational therapy or another health care profession. Jurisdiction means any state, U.S. territory, or foreign country.		☐ Jurisdiction provides and mails directly to Board
Occupational Therapy Jurisprudence Exam Registration. You must score a 90% or better to pass the examination. Please select the ***Ohio OT Jurisprudence Exam for Licensure Applicants*** on the Course Catalog and make sure that you request that a transcript be sent. Additional information about the exam is available on the *Ohio OT Jurisprudence Exam* link on the Occupational Therapy Continuing Education page on the Board's website.		☐ Register to sit for the Jurisprudence Exam at https://ohiootptatboard.myicourse.com
Criminal records check. Please review the *BCI/FBI Criminal Records Check Instructions* document on the Board's website for additional information. Please note that if your license is not issued within 6 months of the date the Board receives the criminal records check results, you will be required to submit new criminal records checks.		☐ BCI submits directly to Board
NBCOT Certification Examination Registration. You are required to register with the National Board for Certification in Occupational Therapy (NBCOT) to sit for the NBCOT Certification Exam. When you register for the exam, please make sure to request NBCOT to send an Official Score Transfer to Ohio.		☐ Register with the NBCOT at https://secure.nbcot.org/nbcot/login/login.aspx
Non-U.S. Educated Applicants for Licensure. Please review the *Guidelines for Non-U.S. Educated Applicants for Occupational Therapy Licensure* document on the Board's website for information about the additional application requirements for Non-U.S. educated applicants.	☐	
Applicants with Felony Convictions. Please review the *Requirements for Applicants with Felony Convictions* document on the Board's website for information about information that should be submitted to expedite the processing of your application.	☐	
Instructions for Applicants Who Graduated from the Entry Level OT/OTA Program 5 or More Years Prior to the Date of this Application. Please review the *Instructions for Applicants Who Graduated More Than 5 Years Prior to Submitting an Exam Application* document on the Board's website for information about submitting an application if you graduated from your entry level OT/OTA program more than 5 years prior to the date you are submitting an examination application.	☐	

Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
77 South High Street, 16th Floor
Columbus, Ohio 43215-6108

Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

Military Request Application Addendum

(This form applies to members of the armed forces, veterans, and spouses of members of the armed forces/veterans)

Please provide the First and Last Name and Social Security Number of the individual applying for the Ohio license:	
1. Have you served in the U.S. military?	Yes No
2. Has your spouse served in the U.S. military?	Yes No

If you answered No to both question 1 and 2, you are not eligible for military benefits.

3. If you answered Yes to question 2, please provide your spouse's First and Last Name:	
4. In which branch of the military did you/your spouse serve?	
5. Please provide the military service dates:	Military Service From: Military Service To:
6. Are you still active in the military or reserves?	Yes No
7. Were you discharged under honorable conditions?	Yes No
8. For which profession are you seeking a license?	OT | OTA | PT | PTA | AT

In addition to this application addendum, you must also submit the appropriate licensure application and a copy of your/your spouse's DD214 form or proof of current service. Please contact your County Veterans Services Office (1-877-OHIO-VET) or the Ohio Department of Veterans Services (www.ohiovet.gov) if you need assistance in obtaining a copy of the DD214 form.

You can access the licensure application at http://otptat.ohio.gov.

(Revised June 2014)

Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
77 South High Street, 16th Floor
Columbus, Ohio 43215-6108

Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

CRIMINAL RECORDS CHECK REQUIRED FOR INITIAL LICENSURE

Section 4755.70 of the Ohio Revised Code requires all individuals applying for a license issued by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board to submit fingerprints for a criminal records check completed by the Ohio Bureau of Criminal Identification and Investigation (BCI) and the Federal Bureau of Investigation (FBI).

Instructions for Individuals Residing in Ohio or Within 75 Miles of Ohio

Applicants residing in Ohio or within 75 miles of Ohio are required to utilize "WebCheck" to electronically submit their fingerprints to BCI. The Board will typically receive the results of a criminal records check submitted via "WebCheck" within 7 to 10 business days. In addition to the $22 BCI fee and the $24 FBI fee, the electronic fingerprinting company or law enforcement agency may charge its own fee to process the fingerprints.

Since the law requires applicants to submit a records check completed by both BCI and the FBI, you must use the services of a "WebCheck" vendor. The sheriff's offices in most of Ohio's 88 counties participate in "Webcheck." A list of other "WebCheck" vendors in Ohio, arranged by county, is available online at:

http://www.ohioattorneygeneral.gov/Services/Business/WebCheck/Webcheck-Community-Listing

When locating an electronic fingerprinting site on the webpage, please note that you must use the services of a vendor that has (BCI & FBI) listed after the vendor's name. Only these entities participate in "WebCheck." The Board does not endorse or recommend any specific electronic fingerprinting company.

You need both the BCI and FBI records check for initial licensure. By law, the Board cannot complete the processing of your application until it receives the background check reports from BCI and FBI.

Steps for "WebCheck"

1. Identify a "WebCheck" vendor that has **(BCI & FBI)** listed after the vendor's name.
2. Tell the "Webcheck" vendor to select "**OT, PT, and Athletic Trainers Board**" from the Direct Copy dropdown list at the Webcheck workstation.
3. Request both a BCI and FBI criminal records check.
4. List the reason fingerprinted as: **Required for licensing per ORC 4755.70**
5. Agency Code: **1AB002 (if requested)**
6. Submit your fee directly to the "WebCheck" vendor. **Do not send your fingerprints or fee to the Board.**

Bring the following information with you to the Webcheck Vendor: (1) this notice; (2) a valid form of photo identification, and (3) payment, in the appropriate amount and form, payable to the vendor.

Revised April 2015

Instructions for Individuals Residing More than 75 Miles From Ohio

You must contact the Board at board@otptat.ohio.gov or 614-466-3774 to request that the Board mail you the appropriate forms to have your fingerprints taken at a local law enforcement agency. Please note, the Board will not mail these cards until after you submit an initial application for licensure. In addition, it takes the FBI 3 to 4 months to process ink rolled fingerprints. Since Ohio does not have temporary licensure, please take this delay into account. You may also elect to physically come to Ohio to have your fingerprints taken electronically to minimize the time it takes to process your application.

Additional Information for Individuals Who Previously Submitted Fingerprints to BCI

When an individual submits fingerprints to BCI for a criminal records check, BCI will keep the fingerprints on file for twelve (12) months. If less than one year has passed since the initial submission of fingerprints to BCI, the applicant can request that BCI run another check on the same fingerprints and run a new criminal records check report to be sent to the Board. In this situation, BCI charges the applicant $8. You will need to provide BCI with the information identified above in the "Steps for WebCheck" section of this notice. If more than 12 months passed since you submitted your fingerprints to the BCI, you will need to submit new fingerprints and follow the steps identified in the first page of this notice.

This service only applies for the BCI check. Even if you previously submitted your fingerprints to the FBI, you will need to identify a "WebCheck" vendor that has (BCI & FBI) listed after the vendor's name, submit new fingerprints, and request that the FBI criminal records check results be sent directly to the Board. You will need to bring this notice with you to the "WebCheck" vendor but will only need to request the FBI check.

Frequently Asked Questions

Question: I recently had an FBI records check completed for another purpose. Can I just use those results to meet the requirements of the Board?

Answer: *No. The law requires that an applicant for an initial license from a licensing agency shall submit a request to the bureau of criminal identification and investigation for a criminal records check of the applicant. Upon completion of the criminal records check, the superintendent of BCI shall report the results of the check, and any information the FBI provides, to the licensing agency identified in the request for a criminal records check.*

Question: How much time will this add to the licensure process?

Answer: *The Board typically receives the criminal records check results approximately 7-10 days after you are electronically fingerprinted. For out-of-state applicants completing the ink-rolled fingerprints, it takes the FBI 3-4 months to process the fingerprints and submit the results of the criminal records check to the Board.*

Question: What happens if I have a criminal history reported to the Board?

Answer: *The Board will review the records related to the criminal history and determine if the offenses identified make you ineligible for licensure in Ohio.*

Question: Will I need to submit a criminal records check to renew my license every two years?

Answer: *No. The records check requirement does not apply to the biennial renewal process or to individuals reinstating an expired Ohio license.*

Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
77 South High Street, 16th Floor
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Requirements for Applicants with Felony Convictions

If you are applying for licensure in the State of Ohio and you were convicted of a felony, you must provide the Board with a signed statement describing the details of the event(s) that led to the felony conviction and certified copies of the following court records:

1. Indictment
2. Plea Entry
3. Disposition
4. Sentencing Entry
5. Terms of Parole or Probation
6. Parole or Probation Release/Discharge

Failure to provide these documents will result in a delay in the processing of your applications. If you have any questions about this requirement, please contact the Board at 614-466-3774 or board@otptat.ohio.gov.

CERTIFICATION OF APPLICANT (for online applications only)
This form must be sworn to in the presence of a Notary Public or an officer authorized to administer oaths.

This portion must be completed by the applicant. Please print or type.	
Applicant Name (First, Middle, Last):	**Staple Passport Photograph Here** Photograph must be 2x2 inches in size, full face, front view, between 1 inch and 1 3/8 inches from the bottom of the chin to the top of the head. Background color white, off-white, or light blue. Photograph must be taken with the past 6 months. Print and sign your name on the back of the photograph.
Social Security Number or Alien Registration Number:	
Daytime Phone Number	
Email Address	

I, _____, certify that I am the person referred to in this application and that the foregoing statements are true in every respect, and that the attached photograph is a true likeness of myself.

I hereby authorize all my references; educational institutions; employers; business; professional organizations and associates - past, present, and future- to release to the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board any information requested by the Board in connection with the processing of this application or subsequent licensure.

In compliance with the Revised Code, section 1347.05(E) you are notified that failure to supply the information requested on the application may result in denial of the application.

I hereby certify to the Occupational Therapy Section that I am not presently functioning and will not function as an Occupational Therapist or Occupational Therapy Assistant or use any titles or initials to indicate or imply that I am licensed in Ohio to perform occupational therapy services until I receive a license from the OT/PT/AT Board.

I further certify that if I accept employment as an OT/OTA, I will only perform duties in accordance with the laws and rules governing occupational therapy practice in the State of Ohio.

I understand the Board is authorized to investigate persons whom they have reason to believe are unlawfully practicing occupational therapy.

I further certify that if I hold an H-1B visa, I am not employed in any capacity that violates the terms of my H-1B visa.

I further understand that pursuant to section 4755.11 of the Ohio Revised Code, the Occupational Therapy Section may suspend, revoke, or refuse to issue or renew the license of an individual who has violated any of the laws and rules governing occupational therapy in the State of Ohio.

_____ _____
Applicant's Signature Date

Subscribed and sworn to in my presence this _____ day of _____, Year_____

_____
Signature of Notary Date Commission Expires

Notary Seal

Return This Document To:
Ohio OT PT AT Board, 77 South High Street, 16th Floor, Columbus, Ohio 43215-6108 Revised July 30, 2013

State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board

Passport Photograph Guidelines

The Ohio OTPTAT Board accepts passport photographs that meet the US Passport Guidelines established by the U.S. Department of State's Passport Services Directorate. For additional information on the photograph preparation requirements contained in the US Passport guidelines please visit the U.S. Department of State's travel information website (http://travel.state.gov).

Photograph Positioning and Background

1. Frame subject with full face, front view, eyes open
2. Make sure photo presents full head from top of hair to bottom of chin; height of head should measure 1 inch to 1-3/8 inch (25 mm to 35 mm)
3. Center head within frame (see page 2)
4. Make sure eye level is between 1-1/8 inch and 1-3/8 inch (28 mm and 35 mm) from bottom of photo
5. Photograph subject against a plain white or off-white background
6. Position subject and lighting so that there are no distracting shadows on the face or background
7. Encourage subject to have a natural expression

Photograph Print Properties

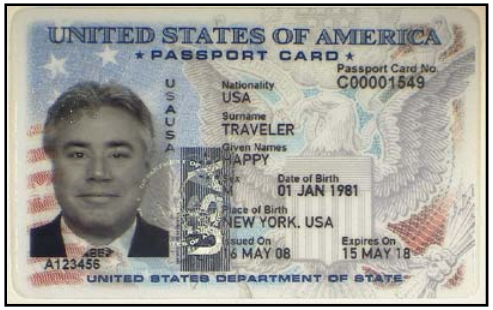
Produce 2 inch x 2 inch (51 mm x 51 mm) color photo. Print photo on thin photo paper or stock. Ensure the print is clear and has a continuous tone quality. Do not retouch or otherwise enhance or soften photo.

The following pages were taken from the U.S. Department of State's website (http://travel.state.gov).

Revised January 2011

77 S. High Street, 16th Floor · Columbus, Ohio 43215-6108 · 614-466-3774 · Fax: 614-995-0816 ·
http://otptat.ohio.gov · board@otptat.ohio.gov

Passport Book & Card Photograph Quality Requirements



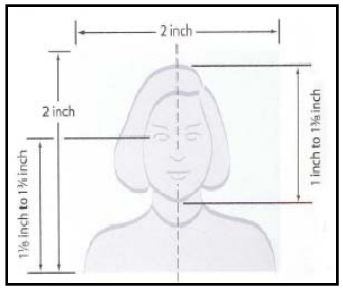
In order to print your passport picture, clear and correctly exposed photos must be submitted with your application – especially when applying for the U.S. passport card which displays a black and white image of the bearer. See the following examples of acceptable and unacceptable photos to ensure that the photographs you submit are correct.

The **most common** reason for a passport photo to be rejected for use is the **over exposure** or **lightness** of the photograph.

Photo 1 is **not acceptable** because it is **over exposed**, as you can see from the light patches discoloring the woman's face.

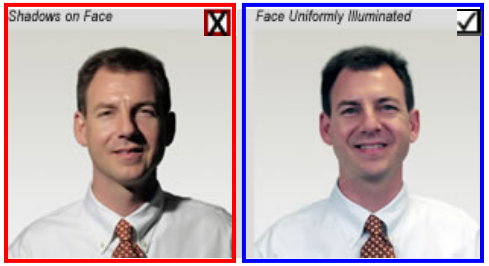
Photo 2 is acceptable

Photographs should be **2 x 2 inches** in size. The face size, measured from the bottom of the chin to the top of the head (including hair), should not be less than 1 inch or more than 1 3/8 inches.

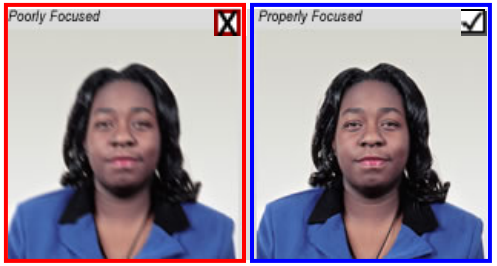


Other examples of unacceptable and acceptable passport photographs include:

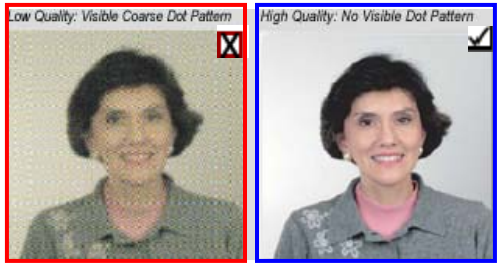
Shadows on Face



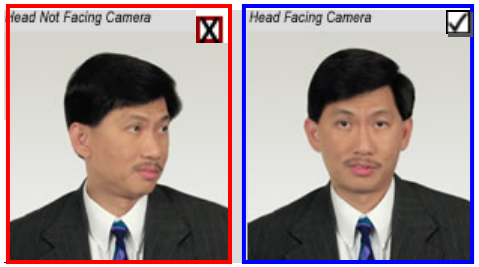
Poorly Focused



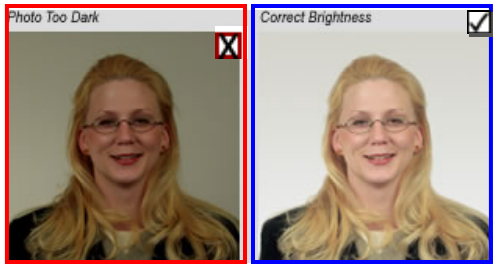
Low Quality/Visible Dots



Incorrect Facial Direction



Dark Photo



Passport and Visa Digital Image Requirements and Specifications

The submitted digital face image must adhere to the following specifications. Please be advised that failure to comply with any of the following requirements may result in rejection of your image by the online image quality assessment test or by a human reviewer.

Examples of well-composed images

Image Requirements – Technical Specifications	
Acquisition	The image file may be produced by acquiring an image with a **digital camera** or by digitizing a paper photograph with a **scanner**.
Dimensions	Image pixel dimensions must be in a square aspect ratio (meaning the height must be equal to the width). Minimum acceptable dimensions are **600 pixels (width) × 600 pixels (height)**. Maximum acceptable dimensions are **1200 pixels (width) × 1200 pixels (height)**.
Color	Must be in color (24 bits per pixel) in **sRGB** color space (common output of most digital cameras).
File Format	Must be in the Joint Photographic Experts Group (**JPEG**) file interchange format (JFIF).
File Size	Must be less than or equal to **240 kilobytes**.
Compression	The image may need to be compressed in order for it to be under the maximum file size. The compression ratio used should be less than or equal to 20:1.
Additional requirements if scanning:	
Print Size	If scanning the image from a paper photograph, the size of the paper photograph should be at least 2 inches × 2 inches (51 mm × 51 mm) square.
Resolution	Printed photographs should be scanned at a sampling frequency of at least 300 pixels per inch.
Image Requirements – Composition	

Content	• The image must contain the full face, neck, and shoulders of the applicant in frontal view with a neutral, non-smiling expression and with eyes open and unobstructed and directed at the camera. • All facial features must be visible and unobstructed. • No extraneous objects, additional people, parts of the body below the applicant's shoulders, or other artifacts. • The image must be from a recent (within 6 months) photo of the applicant.
Head Size	• The head height or facial region size (measured from the top of the head, including the hair, to the bottom of the chin) must be between 50% and 69% of the image's total height. • The eye height (measured from the bottom of the image to the level of the eyes) should be between 56% and 69% of the image's height.
Head Orientation	• Subject must directly face the camera. • Head must not be tilted up, down, to the side, or toward the shoulders. • Head must be centered within frame.
Background	• Subject must be surrounded by a plain, light-colored background with no distracting shadows on the subject or background.
Focus	• The entire face must be in focus and not overly-sharpened.
Brightness/ Contrast	• Brightness and contrast should represent subject accurately.
Color	• Image must be in color (24 bits per pixel). • Black and white photos are not acceptable. • Color should reproduce natural skin tones. • Color must be continuous tone – no posterization.
Exposure/ Lighting	• Photo may not be over- or under-exposed.

	• Avoid shadows on face or background.
Resolution	• Fine facial features should be discernible. • No discernible pixels/pixelization, graininess, or dot patterns.
Compression	• Image must not be overly compressed (the compression ratio used should be less than or equal to 20:1).
Alteration	• Digital enhancement or other alterations or retouching are not permitted. • When resizing, the aspect ratio of the image must be preserved (no image stretching is allowed).
Eyeglasses	• Eyeglasses are acceptable in photo only if the lenses are not tinted and there is no glare, shadows, or rims/frames obscuring the eyes. Glare on eyeglasses can usually by avoided by a slight upward or downward tilt of the head. • Dark glasses or nonprescription glasses with tinted lenses are not acceptable unless you need them for medical reasons.
Decorative Items	• No sunglasses or other items that obscure the face. • Hats or head coverings are only allowed if worn for religious reasons AND if they do not obscure any facial features.

State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board

Certification of Entry Level Education

Section I: This portion must be completed by the applicant. Please print or type.	
Name (First, Middle, Last):	Maiden Name:
Complete Mailing Address	
Social Security Number or Alien Registration Number:	Date of Birth: (mm/dd/yyyy):

Applicant's Signature _____ Date _____

Section II: This Section must be completed by an official from the program where an occupational therapy degree was earned. If the institution does not use a school seal, the official signing the verification must sign this form in the presence of a Notary Public. **The educational institution must mail the completed form directly to the OT PT AT Board at the address below. Documents received directly from the applicant will not be accepted. Please print or type.**

I hereby certify that _____ completed the didactic and
(Student's Name and SSN)

clinical education requirements of the _____ program on _____
(Program Type :OT, OTA) *(mm/dd/yyyy)*

and is eligible for or has been granted the degree of _____ .
(Degree: AAS, Certificate, BS, MOT, OTD etc.)

Name of Institution:	
City, State, Zip Code:	
Phone Number w/ Area Code:	Is this entry level program ACOTE accredited? ○ Yes ○ No

Print Name _____ Title _____

Signature _____ Date _____

If a Notary Public is used, please complete the following:

Subscribed and sworn to in my presence this _____ day of _____, Year_____.

Signature of Notary _____ Date Commission Expires _____

Return This Document To:
Ohio OT PT AT Board
77 South High Street, 16th Floor
Columbus, OH 43215-6108

School or Notary Seal

State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board

Verification of Licensure

This form must be completed by an official from each jurisdiction where the applicant currently holds or has ever held a license, certification, or registration to practice an occupational health profession. Jurisdiction means any state, U.S. territory, or foreign country. You may copy this form and forward it as needed. Please contact each state directly to determine their license verification process.

This section must be completed by the applicant. Please print or type.		
Name (First, Middle, Last):	Maiden Name:	
Name as it appears on this state's license, certificate, registration, or permit:		
Type of License/Certificate/Registration/Permit: ○ OT ○ OTA ○ PT ○ PTA ○ AT ○ Other _____	Jurisdiction	License Number
Social Security Number:	Date of Birth (mm/dd/yyyy):	

The Ohio OT PT AT Board requests that I submit evidence of my license/certification/registration/permit in your jurisdiction. You are hereby authorized to release any information in your possession pertaining to me directly to the Ohio OT PT AT Board, 77 South High Street, 16th Floor, Columbus, Ohio, 43215-6108.

Applicant Signature _____ Date _____

This section must be completed by an administrative officer of the regulatory agency. Please print or type.			
Licensure Jurisdiction:	License Number:	Original Issue Date:	Expiration Date:
Current Licensure Status: ○ Active ○ Inactive/Expired ○ Suspended/Revoked ○ Other (Explain)			
The license was issued on the basis of: ○ Examination ○ Endorsement ○ NBCOT or BOC ○ Grandfather ○ Other (Explain)			
Has the applicant's license to practice ever been restricted or disciplined in any way? If yes, please explain and attach any relevant documentation.			
Does the applicant have any pending complaints or is the applicant currently under investigation? If yes, please explain and attach any relevant documentation.			

Print Name _____ Title _____

Signature _____ Date _____

Return This Document To:

Ohio OT PT AT Board
77 South High Street, 16th Floor
Columbus, OH 43215-6108

Board Seal

State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board
Occupational Therapy Section

Occupational Therapy Jurisprudence Examination Instructions

The Ohio OT Jurisprudence Exam is open book. You will need to download the Ohio Occupational Therapy Practice Act (Laws and Rules) before beginning this examination.

1. You will need to create a user profile to access the online Ohio OT Jurisprudence Exam. To create a user profile, click on the "New User" link in the upper right hand corner of the page accessed at the link below and complete the required information. The accuracy of this information will help ensure that the Board can match your exam results to your license application and/or your Ohio license.

2. On the Course Catalog page, select the box in the Enroll column next to the appropriate exam and click on the "Order now" button.

* Please select the "**Ohio OT Jurisprudence Exam For Licensure Applicants**" on the Course Catalog page if you are taking the exam as part of your licensure application.

* Please select the "**Ohio OT Jurisprudence Exam for CE Credit**" on the Course Catalog page if you are taking the exam for continuing education credit.

There is no additional fee to take the Jurisprudence Exam.

3. Once you complete the exam, you will see your score and will be prompted to send transcripts. The Board will automatically receive a copy of the transcript that you send to yourself. Make sure to: (1) check the box to add the course to your transcript; (2) enter your email address in the "E-mail Transcripts to:" box; (3) preview the transcript; and (4) send the transcript.

Please do not forget to request that the transcript be sent.

The Ohio OT Jurisprudence Exam can be accessed at **https://ohiootptatboard.myicourse.com**.

State of Ohio

Occupational Therapy, Physical Therapy, and Athletic Trainers Board
Occupational Therapy Section

Guidelines for Non-U.S. Educated Applicants for Occupational Therapy Licensure

A non-U.S. educated applicant is a person whose occupational therapy education was obtained in a program not accredited by the Accreditation Council for Occupational Therapy Education (ACOTE).

Section I: General Information

TYPES OF APPLICATIONS

License by Exam is for individuals seeking licensing in Ohio who already passed (or are scheduled to sit for) the NBCOT certification examination but do not hold an occupational therapy license in another U.S. state or territory.

License by Endorsement is for individuals seeking licensure in Ohio who hold a current, valid license to practice occupational therapy in another U.S. state or territory.

Endorsement applicants must meet all of the same criteria required for licensure by exam. Having a license in another state does not mean that you will automatically qualify to practice in Ohio.

If the wrong application is received by the Board, the applicant will be sent the correct one to complete.

Section II: Requirements for Non-U.S. Educated Applicants

CREDENTIAL EVALUATION

Pursuant to the Ohio Occupational Therapy Practice Act, all non-U.S. educated applicants must have an educational background deemed by the Occupational Therapy Section to be substantially equivalent to an occupational therapy program accredited by the Accreditation Council for Occupational Therapy Education (ACOTE).

All non-U.S. education must be evaluated by a professional evaluating service. Original credential evaluations must be sent directly to the Board from the evaluating organization. Evaluations are required to assist the Section in making a decision regarding the equivalency of the non-U.S. education. Credential evaluations reflect only the findings and conclusions of the evaluator and are not binding upon the Section. The Section will take action on applications only after it has received and reviewed an evaluation of non-U.S. education, in addition to all other required documents.

The following are the organizations approved to conduct credential evaluations for Ohio. Please contact them directly at:

Educational Credential Evaluators, Inc. – http://www.ece.org
International Consultants of Delaware – http://www.icdeval.com
International Credentialing Associates, Inc. – http://icaworld.com
NBCOT – http://www.nbcot.org
World Education Services, Inc. – http://www.wes.org

Note: In accordance with rule 4755-3-01, an evaluation is not required if an applicant was initially certified by NBCOT on or after January 1, 2004.

WORKING KNOWLEDGE OF ENGLISH

All non-U.S. educated applicants must demonstrate a working knowledge of English by:

1. Obtaining scores of at least 4.5 of the TWE; 50 on the TSE; and 220 on the computer based TOEFL or 560 on the paper based TOEFL; or

2. Obtaining scores on the TOEFL iBT of at least 24 on the writing section; 26 on the speaking section; 18 on the reading comprehension section; 21 on the listening comprehension section; and 89 on the overall examination.

To register for either exam, please visit http://www.toefl.org. The Ohio OTPTAT Board's agency code is 9099.

Note: In accordance with rule 4755-3-01, proof of passage of the TOEFL exam is not required if an applicant was initially certified by NBCOT on or after January 1, 2004.

Section III: Fees

All fees or costs incurred by an application while gathering information connected with the filing of an application are the responsibility of the applicant.

It is the applicant's responsibility to be aware of and in compliance with current requirements of the Occupational Therapy Section. It will take some applicants as long as one year to gather the required items to complete the application. The completed application will be reviewed based upon the Section's current guidelines.

In accordance with rule 4755-3-01 (I), all applications that remain incomplete one year after the initial application filing date are considered to be abandoned and no further processing shall be undertaken on that application. After that time, a new application and fee will be required to be considered for licensure in Ohio.

Occupational Therapy Section
Limited License Reference Guide

Additional requirements for individuals who have been out of practice for five or more years include: (1) Additional continuing education; (2) Competency-based performance appraisals; (3) Mentorship; (4) Professional development plan; (5) Extended coursework; and (6) Retaking and passing the NBCOT certification examination.

Out of practice is defined as "being actively engaged in the practice of occupational therapy for fewer than two hundred fifty (250) hours over the five year period prior to the date the applicant submits the licensure application.

OT/OTA Out of practice for 5 years or more

Step 1:
1. Completion of AOTA CE Course titled
   "Exploring the Occupational Therapy Practice Framework: Domain and Process, 3rd Edition Short Course"

Step 2:
Primary Option: Retake NBCOT Certification Examination within 6 months of date of Limited License (LTD) agreement. Full, unrestricted license issued upon passage of NBCOT exam.

Alternate Option: Issuance of Limited License Followed by Supervised Practice:

- **a)** 320 hours/first 6 months of licensure; 8 hours of supervision per week must be direct supervision.
- **b)** AOTA Fieldwork Performance Evaluation at midterm and final rating/ must be completed by supervising OT within 30 days upon completion of supervised practice hours.
- **c)** Log of supervised clinical practice, which shall include the date, signature of the primary/non-primary supervising occupational therapist/occupational therapy assistant, and number of hours supervised.

The deadline to complete the terms of the limited license agreement is 12 months from the date of the limited license letter.

The Section will take into consideration the length of time the individual practiced prior to not working, prior practice settings, specialties/certifications maintained while practicing, and/or how the individual kept up with the practice of occupational therapy while they were out of practice.