



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE

DIVISION OF PROFESSIONAL REGULATION

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FAX COVER PAGE

To: _____ From: _____
Total _____ Phone: _____
Pages: _____ Fax: _____
Fax: _____ Email: _____
Date: _____

PLEASE COMPLETE THIS SECTION!

In Regard to: Name(s): _____
 Application Renewal DE License #: _____ Complaint #: _____
 Other: _____ DE License #: _____

Check profession(s):

- | | | |
|--|--|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Genetic Counselors | <input type="checkbox"/> Paramedics |
| <input type="checkbox"/> Accountancy | <input type="checkbox"/> Geologists | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Acupuncture/Detox Specialists | <input type="checkbox"/> Hearing (Audiology, Aid Dispensers) | <input type="checkbox"/> Physical Therapy |
| <input type="checkbox"/> Adult Entertainment | <input type="checkbox"/> Home Inspectors | <input type="checkbox"/> Physicians/Physician Assistants |
| <input type="checkbox"/> Aestheticians | <input type="checkbox"/> Homeowner Electrical Permits | <input type="checkbox"/> Plumbers |
| <input type="checkbox"/> Architects | <input type="checkbox"/> HVACR | <input type="checkbox"/> Podiatrists |
| <input type="checkbox"/> Athletic Trainers | <input type="checkbox"/> Land Surveyors | <input type="checkbox"/> Polysomnographers |
| <input type="checkbox"/> Barbering | <input type="checkbox"/> Landscape Architects | <input type="checkbox"/> Prescription Monitoring Program |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Magistrates (Justice of Peace) | <input type="checkbox"/> Professional Counselors |
| <input type="checkbox"/> Chiropractic | <input type="checkbox"/> Manufactured Home | <input type="checkbox"/> Psychologists |
| <input type="checkbox"/> Combative Sports | <input type="checkbox"/> Marriage and Family Therapy | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Controlled Substance | <input type="checkbox"/> Massage and Bodywork | <input type="checkbox"/> Real Estate Appraisers/Assessors |
| <input type="checkbox"/> Cosmetology | <input type="checkbox"/> Medical | <input type="checkbox"/> Respiratory Care |
| <input type="checkbox"/> Deadly Weapon Dealers | <input type="checkbox"/> Midwife (non-Nursing) | <input type="checkbox"/> River Pilots |
| <input type="checkbox"/> Dentistry | <input type="checkbox"/> Nail Technicians | <input type="checkbox"/> Shops/Salons |
| <input type="checkbox"/> Dietitians/Nutritionists | <input type="checkbox"/> Nursing | <input type="checkbox"/> Social Workers |
| <input type="checkbox"/> Eastern Medicine | <input type="checkbox"/> Nursing Home Administrators | <input type="checkbox"/> Speech Pathology |
| <input type="checkbox"/> Electricians | <input type="checkbox"/> Occupational Therapy | <input type="checkbox"/> Tamper Resistant Prescriptions |
| <input type="checkbox"/> Funeral Services | <input type="checkbox"/> Optometrists | <input type="checkbox"/> Veterinary Medicine |
| <input type="checkbox"/> Gaming | | |

Comments:

