



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

**STATE OF DELAWARE**

TELEPHONE: (302) 744-4500  
FAX: (302) 739-2711  
WEBSITE: [DPR.DELAWARE.GOV](http://DPR.DELAWARE.GOV)  
EMAIL: [customerservice.dpr@delaware.gov](mailto:customerservice.dpr@delaware.gov)

## **APPLICATION OF MILITARY MEMBER FOR PROVISIONAL PROFESSIONAL LICENSE INSTRUCTION SHEET**

**Enter your DELPROS application number here: APP - \_\_\_\_\_**

### **What is a Provisional License?**

A provisional license allows you, as a military member, to practice for up to six months in any profession administered by the Delaware Division of Professional Regulation while your application for a professional license is pending. A list of professions administered by the Division is available on [dpr.delaware.gov](http://dpr.delaware.gov). For the requirements to file an application for a specific professional license, click your profession.

If you previously held a Delaware license to practice your profession and that license lapsed within the past two years, you may apply to reinstate that license instead of applying for a provisional license. For the requirements to reinstate a specific professional license, go to [dpr.delaware.gov](http://dpr.delaware.gov) and click your profession.

### **When to Apply**

You may apply for a provisional license if you meet all these conditions:

- You are a member of the active duty military, National Guard or military reserve who has been reassigned to a duty station in Delaware or who has been deployed by the President of the United States or the Governor of Delaware.
- You hold a *current* license in good standing to practice your profession in at least one other jurisdiction (state, U.S. territory or District of Columbia) **and** there is no unresolved complaint, review procedure or disciplinary proceeding against any license you hold.
- You are simultaneously filing or have already filed an application for a professional license and that application is still pending with the Division.

At least one of your current licenses must be issued by a jurisdiction where the licensure requirements are substantially similar to Delaware's requirements. The Board or Commission for your profession may have previously determined whether another jurisdiction's requirements are substantially similar to those of Delaware. However, if it has not previously made any such determination, the Board or Commission must compare the laws and regulations of the jurisdiction to those of Delaware. You are not eligible for a provisional license if no jurisdiction where you hold a current license has substantially similar requirements.

### **How to Submit This Application in DELPROS**

You must have a DELPROS user account to use the new online system. Go to the [DELPROS](#) online portal, and then click on **Apply/Manage a License and Service Requests**.

If you are a new user, you must create a new account using either of the options below:

- Select the "I Don't Have a License" option if you do not currently hold or previously applied for a Delaware license and do not have a login through the portal; or
- Select the "I Have a License" option if you currently hold or previously applied for a Delaware license.

If you are already an existing user, log in with your email address and password under the existing user section.

## Requirements for *All* Applicants

The following requirements for applying for a provisional license are *in addition to* the requirements for applying for a professional license in your profession. Note that it is not necessary to re-submit any documentation already submitted in connection with your professional license application. All of the following documents should be attached to the application.

- Mail a completed, signed and notarized [Application by a Military Member for a Provisional Professional License](#).
- Attach a copy of official verification, such as military orders, showing that you are a member of the active duty military, National Guard or military reserve who has been reassigned to a duty station in Delaware **or** who has been deployed by the President of the United States or the Governor of Delaware.

## Additional Requirements

The Board or Commission office will contact you to request the following additional documentation only if unable to locate the needed information on the other jurisdictions' websites and the documentation has not already been received in connection with your professional license application:

- Arrange for the Board office to receive verification of licensure sent *directly* from the other jurisdiction to the Board/Commission office.
- Attach a copy of another jurisdiction's licensure law and regulations applicable to your profession. This will be requested when the Delaware Board/Commission has not previously determined whether the jurisdiction's licensure requirements are substantially similar to those of Delaware.



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**APPLICATION OF MILITARY MEMBER FOR PROVISIONAL PROFESSIONAL LICENSE**

**TYPE OF PROVISIONAL LICENSE – You cannot submit this application without submitting the full license application. Enter your DELPROS application number here: APP - \_\_\_\_\_**

1. Enter the following information about the type of provisional license you are applying for.

Profession: \_\_\_\_\_ License Type: \_\_\_\_\_  
Examples: Physical Therapy, Electrical, HVACR, Dentistry Examples: PT, Master Electrician, Dental Hygienist

2. Have you previously held a Delaware license of the type you entered above? Yes  No  If yes, enter the following information about that license:

License No: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

3. You are required to apply for your professional license *in addition to* a provisional license. Check one:

- I am applying for a professional license at the same time as a provisional license.  
 I previously submitted my application for a professional license.

**IDENTIFYING INFORMATION**

4. Name: \_\_\_\_\_  
Last First Middle

5. Date of Birth (month/day/year): \_\_\_\_\_ Gender: Male  Female

6. Do you have a Social Security Number? No  Yes  If yes, enter your SSN: \_\_\_\_\_

**MILITARY SERVICE**

7. Enter the following information about your military service:

Service: \_\_\_\_\_

Duty Station: \_\_\_\_\_

**Attach a copy of official verification that you are a member of the active duty military, National Guard or military reserve who has been reassigned to a duty station in Delaware or who has been deployed by the President of the United States or the Governor of Delaware.**

**LICENSURE HISTORY**

8. Do you hold a *current* professional license in another jurisdiction (state, U.S. territory or D.C.)? Yes  No  If yes, complete the following about your current licenses. If you need more room, attach a separate sheet.

JURISDICTION	LICENSE TYPE	LICENSE NUMBER	EXPIRATION DATE

**Applications that are not complete within 12 months of the application submitted date will be considered abandoned and discarded.**

**AFFIDAVIT**

The undersigned, being sworn, deposes and says that he or she is a member of the military applying for a provisional professional licensure under the terms of Title 29, Section 8735, of the *Delaware Code*; that he or she is the person who executed this application; that all statements and answers herein are truthful; that he or she has not suppressed any information that might affect this application; that he or she has read and understands the boards rules and regulations; and that he or she has read and understands this affidavit and the fact that FRAUD OR MISREPRESENTATION IS GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF A LICENSE.

**Signature of Applicant:** \_\_\_\_\_ Date: \_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_

Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_ 2\_\_\_\_\_.

Signature of Notary: \_\_\_\_\_

SEAL

My commission expires: \_\_\_\_\_

**APPLICATIONS THAT ARE UNSIGNED, NOT NOTARIZED, OR INCOMPLETE WILL BE REJECTED.**