

Oklahoma Board of Nursing
2915 N. Classen Blvd., Suite 524
Oklahoma City, OK 73106
(405) 962-1800
www.ok.gov/nursing

**INSTRUCTIONS for
REINSTATEMENT or RETURN to ACTIVE STATUS
of ADVANCED PRACTICE REGISTERED NURSE LICENSE**

Application fee = \$80.00

Use this application if:

- You have been previously licensed as an Advanced Practice Registered Nurse in the same role with the same specialty certification in Oklahoma; and
- Your Advanced Practice Registered Nurse license is currently lapsed, inactive, suspended, voluntarily surrendered, or revoked.

**PLEASE REVIEW THESE INSTRUCTIONS
BEFORE COMPLETING THIS APPLICATION**

**APPLICATIONS ARE AVAILABLE FOR SUBMISSION ONLINE THROUGH
<https://www.ok.gov/nursing/licensing/app/index.php>.**

A paper copy may be requested by the individual applicant by submitting a written request for such to the Board office. The applicant must include a postage-paid (\$1.06 postage cost) 8 ½ x 11 inch return envelope for Board staff to return an application.

Forms referenced may be found in the Forms / Applications link on the Board's website.

Persons employed in nursing without a valid Oklahoma license are hereby notified to cease practice immediately until a valid license has been obtained. **Employment in nursing without a valid license is considered in violation of the provisions of the *Oklahoma Nursing Practice Act*.**

Persons employed as an Advanced Practice Registered Nurse without current licensure from the Oklahoma Board of Nursing and current national certification are notified to cease practice as an Advanced Practice Registered Nurse immediately until current licensure has been obtained. **Employment as an Advanced Practice Registered Nurse without current licensure is considered in violation of the provisions of the *Oklahoma Nursing Practice Act*.** The Advanced Practice Registered Nurse must hold a separate license in each specialty area for which he/she has obtained the required education and certification. Current certification by a national certifying body is required to maintain licensure as an Advanced Practice Registered Nurse by the Oklahoma Board of Nursing.

Only those persons who hold a license to practice advanced practice registered nursing in this state shall have the right to use the title “Advanced Practice Registered Nurse” and to use the abbreviation “APRN”. Only those persons who have obtained a license in the following disciplines shall have the right to fulfill the roles and use the applicable titles: Certified Registered Nurse Anesthetist and the abbreviation “CRNA”, Certified Nurse-Midwife and the abbreviation “CNM”, Clinical Nurse Specialist and the abbreviation “CNS”, and Certified Nurse Practitioner and the abbreviation “CNP”. It shall be unlawful for any person to assume the role or use the title Advanced Practice Registered Nurse or use the abbreviation "APRN" or use the respective specialty role titles and abbreviations or to use any other titles or abbreviations that would reasonably lead a person to believe the user is an Advanced Practice Registered Nurse, unless permitted by this act. Any individual doing so shall be guilty of a misdemeanor, which shall be punishable, upon conviction, by imprisonment in the county jail for not more than one (1) year or by a fine of not less than One Hundred Dollars (\$100.00) nor more than One Thousand Dollars (\$1,000.00), or by both such imprisonment and fine for each offense [59 O.S. 567.3a(5)].

<p style="text-align: center;">REQUIREMENTS for REINSTATING or RETURNING your ADVANCED PRACTICE REGISTERED NURSE LICENSE to ACTIVE STATUS</p>
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The application for reinstatement/return to active status must be approved within two (2) years of the expiration date of licensure; otherwise, current requirements for initial advanced practice licensure must be met which include:

- completion of an advanced practice registered nursing education program in one of the four advanced practice registered nurse roles and a specialty area recognized by the Board. Effective January 1, 2016, the APRN program should be in at least one of the following population foci: family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women’s health/gender-related, or psychiatric/mental health
- submission of a criminal history records check conducted by the Oklahoma State Bureau of Investigation that is not more than 90 days old from the date of receipt of this application. See further information in number 6 of the instructions below
- **Continuing qualifications for practice:** If the Oklahoma APRN license has not been in an active licensure status for a period of two (2) years or more, the applicant for reinstatement of the APRN license must demonstrate continued qualifications for practice through completion of one or more of the following requirements within the last two (2) years prior to receipt of a completed application in the Board office:
 - (A) Submission of an official transcript or certificate of completion verifying completion of an APRN nursing refresher course meeting the requirements established by the Board in policy;
 - (B) Submission of an official transcript verifying successful completion of at least six (6) academic semester credit hours of APRN nursing courses in the same role and population focus as was previously held by the APRN in a graduate-level APRN program, which includes classroom and clinical instruction;
 - (C) Present evidence of licensure or recognition as an APRN in another state with employment in a position that requires APRN licensure or recognition with

- verification of at least 520 work hours during the past two (2) years preceding receipt of the application for reinstatement in the Board office;
- (D) Submit evidence of current national certification consistent with educational preparation and by a national certifying body recognized by the Board.

Verification of current, national certification in an advanced practice specialty: Current national certification in the specialty area at an advanced practice level which is recognized by the Board is required to receive an advanced practice license.

- In order to change or add an area of specialty and national certification, you must meet initial requirements for advanced practice licensure, which requires submission instead of an application for licensure as an APRN.

Verification of current Oklahoma licensure: You must possess a current Oklahoma license to practice as a Registered Nurse.

Renewal requirements: Advanced practice licensure must be renewed concurrently with Registered Nurse licensure in even-numbered years.

- If you are reinstating your advanced practice license within 90 days prior to the expiration date of your RN license, you must renew your license before the advanced practice license reinstatement is granted.

Review of criminal charges, disciplinary action, or judicial declaration of incompetence:

Applicants for advanced practice licensure reinstatement / return to active status who have ever been summoned, arrested, taken into custody, indicted, convicted or tried for, or charged with, or pleaded guilty to, the violation of any law or ordinance or the commission of any misdemeanor or felony, or requested to appear before any prosecuting attorney or investigative agency in any matter; or have ever had disciplinary action taken against a nursing license, certification or registration, any professional or occupational license, registration, or certification and/or any application for a nursing or professional or occupational license, registration, or certification or if there is currently any investigation of your nursing license, registration, or certification; and/or any professional or occupational license, registration, or certification; and/or any application for a nursing and/or professional or occupational license, registration, or certification in any state, territory or country, **or** have ever been judicially declared incompetent are required to notify the Oklahoma Board of Nursing if the incident has not previously been reported in writing to the Board. A “report in writing” means that the applicant/licensee provided a signed and dated description stating in his/her own words the date, location, and circumstances of the incident, and if applicable, the resulting action taken by the court, agency, or disciplinary board. The report may be in the form of a letter or a statement in the provided space on the application. The report must be accompanied by certified court records or a board order. A verbal report does not constitute a “report in writing”. A written report not accompanied by a full set of certified court records or the board order(s) does not constitute a “report in writing”. Failure to report such action is a violation of the *Oklahoma Nursing Practice Act*.

INSTRUCTIONS FOR COMPLETING THE APPLICATION

1. **Completion of application:** The application should be completed and submitted online on the Board's website: <https://www.ok.gov/nursing/licensing/app/index.php>. You must complete all sections of the application **using your name as it appears on your license card**.
 - If you have had a name change since your license has not been in an active status, you must submit a *Name Change Request Form*, fee and the required supporting documentation. You may obtain the *Name Change Request* form on the Board's website, by clicking on the link to "Forms/Applications" or at this link: <http://www.ok.gov/nursing/namechange.pdf>

You must provide a Social Security number on the application. This information is mandatory, pursuant to 56 O.S. § 240.21A

If submitting a hard copy application, you may NOT use correction fluid on the application. When you are finished entering your information, sign the application LEGIBLY, using your full legal name.

Submission of fee: Payment can be made in the form of VISA, MasterCard or electronic fund transfer when completing the application online in the License Registration link.

- If a hard copy application is submitted, attach to your application to the Board office the appropriate fee payable by cashiers check, money order, or personal check. If the fee is not submitted with the application or if the fee is incorrect, the application will be immediately returned without review. Fees submitted are not refundable
2. **Verification of current national certification:** Board staff can verify current national certification directly on the website of the National Board on Certification & Recertification of Nurse Anesthetists, the American Midwifery Certification Board and the National Certification Corporation. For all other certifying bodies, the Advanced Practice Registered Nurse must submit evidence of current certification through her/his certifying body (such as a copy of the certification card).
 - If you wish to change to a different certifying body **within the same specialty area**, please attach a letter of notification with the effective date of the change.
 3. **Review of licensure status:** Before your advanced practice licensure can be reinstated or returned to active status, you must have a current Oklahoma RN license. In addition, you must have previously held advanced practice licensure in Oklahoma. If your Oklahoma Registered Nurse license is not in an active status, you must complete an *Application for Return to Active/Reinstatement* for your RN license. If you have never been licensed as a RN in Oklahoma, please complete the application for *Endorsement*.
 4. **Reinstatement of Prescriptive Authority:** If you hold prescriptive authority authorization and wish to have it reinstated, you must submit a separate *Reinstatement/Return to Active of Prescriptive Authority Application* with the fee for prescriptive authority authorization.

5. ***Criminal Charges, Disciplinary Action, or Judicial Declaration of Mental Incompetence:***
If you answer “yes” to the criminal charges, discipline, or competency questions on the application, you must submit a statement on the application form, describing the date, location and circumstances of the incident, and the resulting action taken by the court or disciplinary board. If you have more than one incident you are reporting, you must speak to every case/charge that has been filed. If you have reported a history of being summoned, arrested, taken into custody, indicted, convicted or tried for, or charged with, or pleaded guilty to, the violation of any law or ordinance or the commission of any misdemeanor or felony, or being requested to appear before any prosecuting attorney or investigative agency in any matter, you must submit certified copies of the:
- **Information Sheet** (brief summary of the incident prepared by the court)
 - **Affidavit of Probable Cause, Charges** (listing of the charges brought against you)
 - **Judgment and Sentencing** (findings of the court and sentence imposed)
 - **verification that sentencing requirements are complete.**

Certified copies are copies of court records obtained from the courthouse in the county/state where the action occurred, dated and signed by the court clerk, and affixed with the court seal. You may obtain these documents from the courthouse in the county/city or in the federal court of the district in which the court action occurred. If no records are found, have the agency provide a certified letter stating no records were found in a search from the date of offense through current. **Internet court documents (such as OCIS case reports) and faxed records will not be accepted. Please note that you must report all arrests and/or charges that have been brought against you.**

If you have reported a history of disciplinary action taken against a nursing license, certification or registration, any professional or occupational license, registration, or certification and/or any application for a nursing or professional or occupational license, registration, or certification or if there is currently any investigation of your nursing license, registration, or certification; and/or any professional or occupational license, registration, or certification; and/or any application for a nursing and/or professional or occupational license, registration, or certification in any state, territory or country, please request that a certified copy of the Board order be submitted directly to the Board office from the licensing agency. If you have reported a history of judicial declaration of mental incompetence, please contact the Board office for further instructions.

6. ***Background Check:*** If it has been greater than two (2) years since your APRN license has been in a non-active status, you must provide fingerprint images to be used for the purpose of permitting a state and national criminal history records search through the OSBI and FBI. The criminal history records search must be conducted through the Board’s vendor, L-1 (MorphoTrust) no more than (90) days prior to receipt of the application in the Board office. The results of the search are provided directly to the Board office usually within one to two weeks. Procedures for changing, correcting or updating OSBI and / or FBI results are set forth in Title 28, C.F.R., §16.34 and will be furnished as needed.

Option 1: If you have an Oklahoma mailing address, you will need to go to an Identogo center sponsored by L-1 (MorphoTrust) located within the state to

provide fingerprints electronically. These sites are available by appointment only. You must visit the following website to schedule an appointment: www.identogo.com, or you must call (877) 219-0197 to make an appointment. Payment can be made during your appointment or online when scheduling. **Please note that your fingerprints must be obtained electronically only at an Identogo (L-1/ MorphoTrust) site.**

Option 2: If you have an out-of-state mailing address, Board staff will mail you specific fingerprint cards that you must take to a local law enforcement agency to obtain the fingerprints. **Please note that you must wait to receive the specific coded fingerprint cards from the Board office prior to obtaining your fingerprints.** An addressed envelope will be provided as the fingerprint cards **must be mailed by the law enforcement agency directly to L-1 (MorphoTrust).** You are responsible for the postage and the costs associated with obtaining your fingerprints. **OR** If you are in Oklahoma, you may follow the instructions for Option 1 above.

GENERAL INFORMATION

You are required to notify the Board in writing of any address changes occurring during the application process. This notification must be signed and submitted in person, by mail, or by facsimile.

All applications are reviewed in the order they are received. You may view average processing times of a completed application on the Board's website in the Agency Data / Statistics / Quarterly Statistics link. Repeated telephone calls to check on the status of your application will delay, rather than facilitate, the processing of your application. Your application to the Board for licensure is valid for one year after receipt. After that time, a new application and fee must be submitted.

Fees submitted are not refundable.

If it is necessary to submit additional information/documents after your application is received, please attach the form titled "Information to be Added to the Application" to the document (see attached form). If the document is coming directly from another individual or entity, please provide the form to that individual or entity. This will help to ensure the document is added to your application file without delay.

In accordance with Oklahoma law (59 O.S. §567.7 (E)), the Executive Director shall suspend the license or certificate of a person who submits a check, money draft, or similar instrument for payment of a fee which is not honored by the financial institution named. The suspension becomes effective ten (10) days following delivery by certified mail of written notice of the dishonor and the impending suspension to the person's address on file. Upon notification of suspension, the person may reinstate the authorization to practice upon payment of the fees and any and all costs associated with notice and collection. The suspension shall be exempt from the Administrative Procedures Act.

COMMON MISTAKES THAT DELAY APPLICATION PROCESSING

Common mistakes that delay the processing of applications include FAILURE TO:

- **Answer all application questions completely**
- **Provide a legible application with no correction fluid used**
- **Provide a Social Security number**
- **Provide the full name under which you were licensed (with the notation “NMN” if there is no middle name)**
- **Provide your RN license number**
- **Sign the application with the full legal name, or signing illegibly**
- **Submit verification of current national certification in the area of your advanced practice specialty**
- **Submit required documentation for initial licensure and for continuing qualifications for practice if the reinstatement is received at the Board office more than two years from the expiration/inactive date**
- **Provide a complete description and documentation regarding a history of criminal charges, disciplinary action, or judicial declaration of incompetence**

INFORMATION TO BE ADDED TO APPLICATION

DATE _____ SOCIAL SECURITY NUMBER _____

NAME ON APPLICATION _____

TYPE OF APPLICATION ON FILE (Please check one):

- _____ Application or Rewrite Application for Licensure by Examination
- _____ Application for Licensure by Endorsement
- _____ Application for Reinstatement of a License, Certificate or Recognition
- _____ Application for Renewal of a License, Certificate or Recognition
- _____ Application for Advanced Practice Licensure or Prescriptive Authority Recognition
- _____ Other: _____

------(DETACH HERE)-----

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- _____ Other: _____