



**ARKANSAS DEPARTMENT OF HEALTH / RADIOLOGIC TECHNOLOGY LICENSURE PROGRAM
License Renewal Information Sheet**

Instructions:

- Fill out this application in its entirety.
- *Failure to properly complete the required forms will delay the processing of your application and may result in your license not being renewed by the expiration date.*
- **Limited Licensed/Grandfathered Technologists**
 - Provide your Continuing Education Credit information on **page 2** or on a separate sheet.
 - DO NOT send individual CE forms.
- All licenses are considered past due on the 1st of the following month and a late fee will be applied.
- Registered Technologists credentialed thru ARRT, NMTCB or RCIS **MUST** include your credentialing information.
- Processing of your license *will* be delayed if you fail to include your credentialing number.

Please **type or print** your full name: _____
(first) (middle) (last)

Street Address: _____

City: _____ State: _____ Zip: _____ -- _____

Date of Birth: _____ Social Security Number: XXX — XX — _____

Phone Number: _____ E-MAIL: _____

Name of Business/Facility: _____

Work Address: _____

Work Phone: _____ WORK E-Mail: _____

Credentialing Body (ARRT, NMTCB, RCIS): _____

Registration number: _____ Expiration Date: _____

Registration number: _____ Expiration Date: _____

**** Failure to complete this information may result in Late Renewal**



Staff Use: Date: _____ Staff Initials: _____

ADH #: _____

License #: _____ License Type(s): RTL_____





CONTINUING EDUCATION REPORT for Limited Scope and Grandfathered Technologists

Six (6) Hours Required Annually

Name of Continuing Education Activity (Fill in lines below)	Number of Continuing Education Hours	Continuing Education Reference/Approval Number

Questions:

Direct questions to Radiologic Technologist Licensure Program

Phone: (501)661-2301

Email, fax, or mail your completed renewal form to:

❖ Online Renewal payment https://www.ark.org/dhhs_permits/index.php

- email address— radiation.administration@arkansas.gov
- Fax Number— (501) 661-2849 or (501) 280-4993

 **Online renewals are processed and updated online within two (2) business days.**

❖ USPS— Send renewal form and check or money order

ADH/Radiation Control

RTL Program

4815 W. Markham, Slot 29

Little Rock, AR 72205-3866