



Arkansas Department of Health

Arkansas State Board of Physical Therapy

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Fee Waiver Form

Pursuant to Act 725 of 2021, an eligible applicant may receive a waiver of the initial license fee. The completed Fee Waiver form and documentation is to be submitted with the license application.

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Benefits Received: _____

I, _____, attest that the documentation provided is a true and correct copy of benefits received.

Signature

Date

D. Initial Fee Waiver for Eligible Applicants

1. Pursuant to Act 725 of 2021, an eligible applicant may receive a waiver of the initial license fee. Eligible applicants are applicants who:

- a. Are receiving assistance through the Arkansas, or current state of residence equivalent, Medicaid Program, the Supplemental Nutrition Assistance Program (SNAP), the Special Supplemental Nutrition Program for Women, Infants, and Children (SSNP), the Temporary Assistance for Needy Families Program (TEA), or the Lifeline Assistance Program (LAP);
- b. Were approved for unemployment within the last twelve (12) months; or
- c. Have an income that does not exceed two hundred percent (200%) of the federal poverty income guidelines.

2. Applicants shall provide documentation showing their receipt of benefits from the appropriate State Agency.

- a. For Medicaid, SNAP, SSNP, TEA, or LAP, documentation from the Arkansas Department of Human Services (DHS), or current state of residence equivalent agency;
- b. For unemployment benefits approval in the last twelve (12) months, the Arkansas Division of Workforce Services, or current state of residence equivalent agency; or
- c. For proof of income, copies of all United States Internal Revenue Service Forms indicating applicant's total personal income for the most recent tax year e.g., "W2," "1099," etc.

3. Applicants shall attest that the documentation provided under subsection D.2. is a true and correct copy and fraudulent or fraudulently obtained documentation shall be grounds for denial or revocation of license.