



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

Instructions:

- Fill out this application in its entirety using **black ink**.
- Renewals will not be processed until a completed Renewal Form is received and Fees have posted.
- Please note that renewal applications may take up to 2-4 weeks to be processed.
- You can find a fillable pdf form at <https://healthy.arkansas.gov/programs-services/licensing-military-member-licensure-permits-plan-reviews/radioactive-technology-licensure-program/forms-radiologic-technology-licensure/>
- **Limited Licensed/Grandfathered Technologists**
 - Provide your Continuing Education Credit information on **page 2** or on a separate sheet.
- 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.

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: _____

ARRT ID number: _____	Valid Thru End Of: _____	Staff Use Verified by: _____
NMTCB ID number: _____	Valid Thru End Of: _____	
RCIS ID number: _____	Valid Thru End Of: _____	
Other Credentials: _____	Valid Thru End Of: _____	

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

Staff Use: Date: _____ Staff Initials: _____

CC #: _____

License Number: _____ License Type(s): RTL ____/____



CONTINUING EDUCATION REPORT for Limited Scope and Grandfathered Technologists

Technologists registered with **ARRT** or **NMTCB** are **not** required to fill out the CE Section.
National Certification requirements serve as your CE.

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

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

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- **DO NOT** email or fax photographed copies or screen shots of the forms, **send them as pdf files.**
- **Email, fax, or mail your completed renewal form to:**
- You can find a fillable pdf form at <https://healthy.arkansas.gov/programs-services/licensing-military-member-licensure-permits-plan-reviews/radioactive-technology-licensure-program/forms-radiologic-technology-licensure/>
- email address— radiation.administration@arkansas.gov
- Fax Number— (501) 661-2849 or (501) 280-4993
- USPS— Send renewal form and check or money order
ADH/Radiation Control
 - RTL Program
 - 4815 W. Markham,
Slot 30 Little Rock, AR
72205-3866