Behavioral Sciences Regulatory Board 700 SW Harrison St. Suite 420 Topeka, KS 66603-3929



**Request for Additional Time to Complete Continuing Education Hours** 

Phone: 785-296-3240 Fax: 785-296-3112 www.ksbsrb.ks.gov

David B. Fye, JD, Executive Director

Laura Kelly, Governor

Legal Name:		
Last	First	Middle
License type, License number, and Expiration Date:		
All licensees under the Behavioral Sciences Regulatory Board are required by law to complete necessary continuing education hours <b>PRIOR</b> to renewing their professional licenses. Under recently enacted 2023 Sub. for SB 131, a licensee who is unable to complete the required continuing education hours for license renewal may request additional time to complete any remaining continuing education hours. Such request shall be made to the Board no later than 30 calendar days prior to the expiration of the license and shall include: (1) The reason for requesting additional time, showing <b>extenuating circumstances</b> for why the hours could not be completed during the license period; and (2) A plan outlining the manner in which the licensee intends to complete the remaining continuing education hours.		
The definition of "Extenuating circumstances" means "any condition or situation caused by events beyond an individual's control that is sufficiently extreme in nature to result in the:  (1) Individual's inability to comply with requirements; or  (2) inadvisability of requiring the individual to comply with requirements."		
Please provide information in a separate document, including the "extenuating circumstances" that were caused by events beyond your control that were sufficiently extreme in nature that will prevent you from completing your continuing education hours prior to the date of the expiration of your license.		
<b>Please provide information</b> in a separate document, including your proposed plan, outlining the manner in which you intend to complete the remaining continuing education hours.		
ATTESTATION: Please check "yes" or "no" for the following statement	ents:	
expiration date to complete the required continue (1) Renew my license, prior to the original license completed on such date. Yes No (2) Notify the Board upon completing the remaining	uing education hours, I wi expiration date and report continuing education hours	t to the Board the number of continuing education hours
I understand that continuing education hours complethe requirements for the license period for which ad		granted under this provision shall be credited only toward s No
I understand that I will not be approved for additional Yes No	al time to complete continuir	ng education requirements in consecutive license periods.

proof of fraud, deceit, or any other act of unprofessional conduct, the Board may suspend, limit, revoke or refuse to renew my license.

I understand that the approval of additional time does not extend the expiration date of my license, but only allows additional time to

I understand in signing this document I am attesting that the aforementioned information is accurate. I understand that upon

complete continuing education hours. Yes \_\_\_\_\_ No\_\_\_\_

Signature:\_\_\_\_\_ Date:\_