Online RN Endorsement Application

CA BOARD OF REGISTERED NURSING

This screen-by-screen overview will assist you in completing the Online RN Endorsement Application through your online BreEZe account.
IMPORTANT TIPS WHEN APPLYING

• Submit your payment the same day you submit the online application. Applications submitted without payment will NOT be processed.

• Please fully read the instructions on each page and follow them carefully. You will NOT be able to make any changes to your application once it has been submitted.

• If you would like to request a Temporary RN License, you will need to submit the “RN Endorsement” application FIRST, and you will then be able to submit the “RN Request for Temporary License” online application through your BreEZe account (you cannot apply for a temporary license only).

• If you submit your online application and forget to attach any required documentation to the application, you can still submit additional document(s) through your BreEZe account. When you log into your BreEZe account, the online application titled “Submit Additional Documents” is located at the Quick Start Menu under the “Applicant Activities” section.
Introduction

- Carefully and fully read the Introduction screen, as it contains important information and helpful links, such as our current Processing Times.

- Please note that paid application fees are not refundable for any reason.

The Application for Licensure by Endorsement instructions is located here: [http://www.im.ca.gov/pdf/Endorsement.pdf](http://www.im.ca.gov/pdf/Endorsement.pdf)

To qualify for endorsement into California as a registered nurse, you must hold a current and active license in another U.S. State/territory or Canada, have completed an educational program meeting all California requirements, and have passed the national licensure examination (NCLEX-RN: ENU or NCLEX-RN: ENU or acceptable five-part Canadian examination. The Canadian Comprehensive Examination is not acceptable.

If you do not possess these qualifications, you must apply license by Examination. For further information, click the following link: [http://www.im.ca.gov/online/exam/exam.shtml](http://www.im.ca.gov/online/exam/exam.shtml)

The California Board of Registered Nursing will issue a license if you are lacking any educational requirements. You must successfully complete an approved course(s) in the subject(s) before a California registered nurse license can be issued.

The Registered Nurse endorsement application fee is an earned fee; therefore, if an applicant is found ineligible, the application fee is not refundable.

Due to varying processing times, please allow appropriate processing time for the final evaluation of your application. Once your application has been evaluated, your application status will be updated in your online eRez account. Processing times may vary, depending on the receipt of documentation from academic programs, agencies, and other states or countries. Current processing times can be found here: [http://im.ca.gov/times.shtml](http://im.ca.gov/times.shtml)

For assistance in completing the online application, step-by-step instructions can be found here: [http://www.im.ca.gov/pdf/applicants/End-app-Instructions.pdf](http://www.im.ca.gov/pdf/applicants/End-app-Instructions.pdf). It is helpful to have these instructions open while completing your online application.

Processing a Registered Nurse endorsement application indicating a conviction(s), disciplinary action(s) and/or voluntary surrender(s) may take longer.

A pending application fee is not a public record; therefore, an applicant may sign a release of information before the Board of Registered Nursing will release information to the public, including employers, relatives, or other third parties.

Once you are licensed, your address of record must be disclosed to the public upon request. All requests for information are mandatory.

Please refer to the General Instructions and Application Requirements regarding the application to obtain a License by Endorsement for a Registered Nurse (RN): [www.im.ca.gov/pdf/applicants/End-app.pdf](http://www.im.ca.gov/pdf/applicants/End-app.pdf)

California statutes and regulations pertaining to Registered Nurses may be obtained by contacting LexisNexis at: [www.lexisnexis.com/bookstore](http://www.lexisnexis.com/bookstore) (search California Nursing).

Press "Next" to continue.

To save and exit your application, click on the "Cancel" button.

During the online application process, do not select the "Back" button on your browser. This will cause your session to end without any updates.
**Information Privacy Act**

- The Information Privacy Act screen contains information on the Information Practices Act, Section 1798.17 Civil Code. You must Agree to this section before continuing with the application.

<table>
<thead>
<tr>
<th>Introduction</th>
<th>14 - RN Endorsement - Information Privacy Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information Privacy Act</td>
<td>INFORMATION COLLECTION AND ACCESS</td>
</tr>
<tr>
<td>Transaction Suitability Questions</td>
<td>The Information Practices Act, Section 1798.17 Civil Code, requires the following information to be provided when collecting information from individuals.</td>
</tr>
<tr>
<td>Application Questions</td>
<td>Agency Name: Board of Registered Nursing</td>
</tr>
<tr>
<td>Name and Personal/Organization Details</td>
<td>Title of official responsible for information maintenance: Executive Officer</td>
</tr>
<tr>
<td>Contact Details</td>
<td>Address: P.O. BOX 94210, SACRAMENTO, CA 94244-2100</td>
</tr>
<tr>
<td>Education History</td>
<td>Telephone Number: (916) 322-3350</td>
</tr>
<tr>
<td>Out of State License Information</td>
<td>Authority which authorizes the maintenance of the information: Section 30, Section 2732.1(a), Business and Professions Code all information is mandatory.</td>
</tr>
<tr>
<td>Healing Art Survey</td>
<td>The consequences, if any of not providing all or any part of the requested information: Failure to provide any of the requested information will result in the application being rejected as incomplete.</td>
</tr>
<tr>
<td>Discipline and Conviction Questions</td>
<td>The principal purpose(s) for which the information is to be used: To determine eligibility for licensure. Your social security number will be used for purposes of tax enforcement, child support enforcement and verification of licensure and examination status. Section 30 of the business and professions code and public law 94-455 (42 USCA 405(c)(3)(C)) authorize collection of your social security number. If you fail to disclose your social security number, you will be reported to the franchise tax board, which may assess a $100 penalty against you. Your name and address listed on this application will be disclosed to the public upon request if and when you become licensed.</td>
</tr>
<tr>
<td>Previous Name(s)</td>
<td>Any known or foreseeable interagency or intergovernmental transfer which may be made of the information: Possible transfer to law enforcement, other government agencies and reporting social security number to the franchise tax board or for child support enforcement purposes pursuant to Section 30 of the business and professions code. Each individual has the right to review the files on records maintained on them by the agency, unless the records are exempt from disclosure.</td>
</tr>
<tr>
<td>File Attachments</td>
<td>Mandatory Reporter: Under California law each person licensed by the Board of Registered Nursing is a &quot;Mandated Reporter&quot; for child abuse or neglect purposes. Prior to commencing his or her employment, and as a prerequisite to that employment, all mandated reporters must sign a statement on a form provided to him or her by his or her employer to the effect that he or she has knowledge of the provisions of Section 11166 and will comply with those provisions.</td>
</tr>
<tr>
<td>Application Summary</td>
<td>California Penal Code Section 11166 requires that all mandated reporters make a report to an agency specified in Penal Code Section 11165.9 (generally law enforcement agencies) whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. The mandated reporter must make a report to the agency immediately or as soon as practicably possible by telephone, and the mandated reporter must prepare and send a written report thereof within 36 hours of receiving the information concerning the incident.</td>
</tr>
</tbody>
</table>

Failure to comply with the requirements of Section 11166 is a misdemeanor, punishable by up to six months in a county jail, by a fine of $1,000, or by both imprisonment and fine.

For further details, consult Penal Code Section 11164 and subsequent sections.

Press "Agree" to continue.

To save and exit this application, click on the "Cancel" button.
Transaction Suitability Questions

- The questions on this screen will determine if you are eligible to submit the Endorsement application.
- Please note that a valid U.S. Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) is required to apply to the Board.

Introduction

Information Privacy Act

Transaction Suitability Questions

Application Questions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you have a U.S. Social Security Number or Individual Taxpayer Identification Number?</td>
<td>No</td>
</tr>
<tr>
<td>Did you pass the National Council Licensure Examination (NCLEX-RN), or the State Board Test Pool Examination (SNITPE) for Registered Nurses in the United States, or the five-part licensing examination in Canada?</td>
<td>No</td>
</tr>
<tr>
<td>Do you possess a current and active license from another U.S. State/U.S. Territory or from Canada?</td>
<td>No</td>
</tr>
<tr>
<td>Have you ever been issued a Registered Nurse license in California?</td>
<td>No</td>
</tr>
<tr>
<td>Did you review the General Instructions and Application Requirements regarding the Application for RN Endorsement?</td>
<td>No</td>
</tr>
<tr>
<td>Do you have a recent 2&quot; x 2&quot; passport type photograph ready to be attached to this online application?</td>
<td>No</td>
</tr>
</tbody>
</table>

The Board of Registered Nursing (BRN) does not accept applications without a U.S. Social Security Number or Individual Taxpayer Identification Number.

The Nursing Practice Act provides for a unified examination and licensing application. Once an application is deemed to have met all of California’s requirements, a license is automatically issued. Under these circumstances the BRN cannot accept applications for examination and licensure without a U.S. Social Security Number or Individual Taxpayer Identification Number.

Pursuant to Section 30(c) of the Business and Professions code the BRN may not process any application for licensure unless the applicant provides a U.S. Social Security Number or Individual Taxpayer Identification Number. Section 30 of the Business and Professions code states in part:

30. (a) Notwithstanding any other provision of law, any board, as defined in Section 22, shall at the time of issuance of the license require that the licensee provide his or her Social Security Number or Individual Taxpayer Identification Number.

(b) Any licensee failing to provide the Social Security Number or Individual Taxpayer Identification Number shall be reported by the licensing board to the Franchise Tax Board and, if failing to provide after notification pursuant to paragraph (1) of subdivision (b) of Section 19528 of the Revenue and Taxation Code, shall be subject to the penalty provided in paragraph (2) of subdivision (b) of Section 19528 of the Revenue and Taxation Code.

(c) In addition to the penalty specified in subdivision (b) a licensing board may not process any application for an original license unless the applicant or licensee provides its Social Security Number or Individual Taxpayer Identification Number where requested on the application.
On this page, you can specify the type of nursing program completed and find other important information regarding submission of fingerprints and military expedite information.
### Name and Personal Details

- Enter your identifying information on this screen.

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
</table>
| Name and Personal/Organization Details | 14 - RN Endorsement - Name and Personal Details
Your name must match EXACTLY as it appears on your photo identification. Items with an asterisk (*) are required for the online application. If your culture does not permit a First Name or Last Name please enter "*" in the appropriate name field.

Pursuant to Business and Professions Code section 36, you MUST provide either your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). The number you provide will be used for purposes related to tax enforcement, compliance with a judgment or order for child or family support in accordance with Family Code section 17520, or for verification of licensure or examination status when a reciprocity agreement or comity exists between that state and California. If you fail to disclose your SSN or ITIN your application will not be processed and you will be reported to the Franchise Tax Board, which may assess a penalty against you.

With the exception of your SSN or ITIN this application and the information contained herein may be disclosed pursuant to a request made under the California Public Records Act.

Press "Previous" to return to the previous screen.
Enter your personal details and Press "Next" to continue.

To save and exit this application, click on the "Cancel" button.

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td></td>
</tr>
<tr>
<td>* First Name</td>
<td></td>
</tr>
<tr>
<td>Middle Name</td>
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<td>* Last Name</td>
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<tr>
<td>Suffix</td>
<td></td>
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<tr>
<td>SSN/ITIN</td>
<td></td>
</tr>
<tr>
<td>* Date of Birth</td>
<td>(mm/dd/yyyy)</td>
</tr>
<tr>
<td>* Gender</td>
<td></td>
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</table>

Effective July 1, 2012, the Board of Registered Nursing is required to deny an application for licensure and to suspend the license/certificate/registration of any applicant or licensee who has outstanding tax obligations due to the Franchise Tax Board (FTB) or the State Board of Equalization (BOE) and appears on either the FTB or BOE’s certified lists of top 500 tax delinquencies over $100,000 (AB 1424, Perea, Chapter 455, Statutes of 2011).
Contact Details

- Add an “Address of Record” here. The Board will use this address, your email address and/or telephone number for any follow-up correspondence.

- Please enter a valid e-mail address to receive important updates from the Board.

- Your “Address of Record” (mailing address) can be updated at any time throughout the application process. Just log into your BreEZe account, and access the online application titled “RN-Change of Address”, located at the Quick Start Menu under the “Application Activities” section.
Education History

Please fully read the information on this screen.

- Enter your nursing school information. School names are sorted alphabetically. If you do not see your school listed, select the “Other” option, located at the top of the list.
- Please leave the “End Date” blank.
- U.S. nursing program graduates: we are now accepting electronic transcripts! Please CAREFULLY read the information on this screen for the process on submitting your transcripts to our Board electronically.
Enter information for where you hold a current and active out-of-state RN license (if you hold multiple active licenses, only information for one active RN license is required).

If your other State Board of Nursing participates in Nursys online licensure verification, be sure to have that verification registered on the Nursys website and sent to the California Board of Registered Nursing.

The California Board of Registered Nursing requires verification of your out-of-state RN license. If your Board of Nursing participates in Nursys®, visit https://www.nursys.com/ to complete verification online and have the verification sent to the California BRN electronically.

In addition, international graduates must submit license verification from your Board of Nursing where you took the examination (NCLEX-RN, SBTPE, or five-part licensing examination in Canada).
The (optional) Healing Art Survey will assist in gathering information on health profession shortages and other relevant data.

If you do not wish to complete this optional survey, simply click the “Next” button.
Discipline and Conviction Questions

- These questions relate to the applicant’s prior discipline or conviction information.
- Answering “Yes” to any of these questions may extend processing time.
- If answering “Yes” to any of these questions, you may attach a written statement (may be typed) explaining your situation on the “File Attachments” screen of the online application.

Have you ever had disciplinary proceedings against any license as a RN or any health-care related license or certificate including revocation, suspension, probation, voluntary surrender, or any other proceeding in any state or country?  
- Yes  
- No

If yes, prepare a written statement including the date, state and/or country where the discipline occurred. You may attach the statement to the Attachments section of this application.

Have you ever been convicted of any offense other than minor traffic violations?  
- Yes  
- No

If yes, prepare a written statement which fully describes the incident as stated in the applicant instructions. You may attach the statement to the Attachments section of this application. Convictions must be reported even if they have been adjudicated, dismissed or expunged or if a diversion program has been completed under the Penal Code or Article 5 of the Vehicle Code. Traffic violations involving driving under the influence, injury to persons or providing false information must be reported. The definition of conviction includes a plea of no contest (no contest), as well as pleas or verdicts of guilty. YOU MUST INCLUDE MISDEMEANOR AS WELL AS FELONY CONVICTIONS.

Have you ever been denied an RN or any other health-care related license in any state/territory?  
- Yes  
- No

If yes, prepare a detailed written explanation, including the date, state and/or country where the denial occurred. You may attach the explanation to the Attachments section of this application.

Notes:

I understand that I am required to report immediately to the California Board of Registered Nursing if I am convicted of ANY offense that occurs between the date of this application and the date that a California license/certificate is issued. I am also required to report to the California Board of Registered Nursing ANY disciplinary action and/or voluntary surrender against ANY health-care related license/certificate that occurs between the date of this application and the date the California license/certificate is issued. I understand that failure to do so may result in denial of this application or subsequent disciplinary action against my license/certificate.

Select the appropriate options and submit your application.
On this screen, click the “Add” button to add any previous name information (such as a former last name).

This may help us in locating transcripts and other documents that may come to our Board under a previously used last name, etc.

If you do not have any previous names, simply click the “Next” button.
You can upload multiple documents to your online application. Please note, after clicking "Browse" and selecting the file on your computer, you MUST click the "Attach" button at the bottom of the screen each time you add a new file. If you do not click the "Attach" button before continuing with the online application, your file(s) will NOT be uploaded.

The screenshots below are a comparison – the screenshot labeled “1” shows a file that has been selected from your computer but has NOT YET been attached. The screenshot labeled “2” shows a file that is successfully attached. You will see the message “Files Uploaded” when you have successfully attached your document(s).

PLEASE MAKE SURE TO VERIFY THAT YOUR FILE(S) ARE ATTACHED CORRECTLY BEFORE CONTINUING WITH THE APPLICATION. A HEADSHOT PHOTO IS REQUIRED FOR EVERY APPLICATION.

<table>
<thead>
<tr>
<th>File Attachments</th>
<th>1 – File Not Uploaded</th>
<th>2 – File Uploaded</th>
</tr>
</thead>
<tbody>
<tr>
<td>• You can upload multiple documents to your online application. Please note, after clicking “Browse” and selecting the file on your computer, you MUST click the “Attach” button at the bottom of the screen each time you add a new file. If you do not click the “Attach” button before continuing with the online application, your file(s) will NOT be uploaded.</td>
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<td>• You can attach more than one file to your application. You MUST click the Attach button each time you add a new file, even if you are only attaching one file. If you do not click the Attach button before before continuing with the online application, your file(s) will NOT be uploaded.</td>
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</tr>
<tr>
<td>14 - RN Endorsement - Attachments</td>
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</tr>
<tr>
<td>The following items may be attached to your online application. Only the first item, a recent 2x2&quot; photo, is REQUIRED. The remaining items are optional. You MUST click the Attach button below each time you add a new file.</td>
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</tr>
<tr>
<td>1. One recent 2” X 2” passport type photograph (REQUIRED).</td>
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</tr>
<tr>
<td>2. A copy of the completed Live Scan form, if applicable. The Live Scan form may be found at <a href="http://www.m.ca.gov/pdf/applicants/livescan.pdf">http://www.m.ca.gov/pdf/applicants/livescan.pdf</a></td>
<td>2. A copy of the completed Live Scan form, if applicable. The Live Scan form may be found at <a href="http://www.m.ca.gov/pdf/applicants/livescan.pdf">http://www.m.ca.gov/pdf/applicants/livescan.pdf</a></td>
<td>2. A copy of the completed Live Scan form, if applicable. The Live Scan form may be found at <a href="http://www.m.ca.gov/pdf/applicants/livescan.pdf">http://www.m.ca.gov/pdf/applicants/livescan.pdf</a></td>
</tr>
<tr>
<td>3. A copy of your NURSTYS.com online verification receipt, if applicable.</td>
<td>3. A copy of your NURSTYS.com online verification receipt, if applicable.</td>
<td>3. A copy of your NURSTYS.com online verification receipt, if applicable.</td>
</tr>
<tr>
<td>4. Any written explanations regarding prior conviction(s), discipline, etc., if applicable.</td>
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</tr>
<tr>
<td>Locate a file with the &quot;Browse&quot; button and press &quot;Attach&quot; or &quot;Remove&quot; as required. Press &quot;Next&quot; when there are no more files to attach. Press &quot;Previous&quot; to return to the previous screen. To save and exit this application, click on the &quot;Cancel&quot; button.</td>
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</tr>
</tbody>
</table>
The Application Summary screen is an overview of all the information you have entered for your online application. Review the accuracy of the information before continuing.

**Application Summary**

- **License Type:** Registered Nurse
- **Application Date:** 03/23/2018

**Application Questions**

- Did you graduate from a Registered Nursing program located in the United States of America/US territory? For additional information, please refer to section VI of the Endorsement application instructions. **Yes**
- Are you reporting any type of prior convictions or discipline against any licenses? For additional information please refer to section II of the Exam Application Instructions. **No**
- Are you requesting a third party to obtain information regarding the status of your pending application? **No**
- Will you be submitting fingerprints via a fingerprint hard card? If “Yes”, this will add an additional $49.96 to your application fee. To request a fingerprint card or Live Scan form, refer to the following instructions below. **Yes**
- REQUESTING FINGERPRINT CARD/LIVE SCAN FORM
- Have you served or are you currently serving in the military? **No**
- Are you requesting expediting of this application for spouses or domestic partners of an active duty member of the Armed Forces? If “Yes”, refer to the following instructions below regarding MILITARY SPOUSE OR DOMESTIC PARTNER REQUIREMENTS. **No**
- Are you requesting expediting of this application for honorably discharged members of the U.S. Armed Forces? **No**

**Personal Details**
Attestation

- Review the Attestation statement before clicking “Yes”.
- Please note that paid application fees are not refunded for any reason.

I declare under penalty of perjury under the laws of the State of California that I am the person herein submitting this application and that I have read the complete application, know the full content thereof, that the information contained in this application and, if necessary, copies of all documents submitted as part of the application are true and correct and that I have read and understand the disclosure statements provided in the instructions for this application. I hereby grant the Department of Consumer Affairs entity permission to verify any information contained in this application.

I understand that any falsification or misrepresentation of any item or response on this application or any attachment hereto is a sufficient basis for denying or revoking a license.

Failure to provide any of the requested information will delay the processing of your application.

I understand that the Application for Licensure by Endorsement fee is an earned fee; therefore, if an applicant is found ineligible the application fee is not refunded.
**Fee and Summary Report**

- You will be shown a summary of required fees. Please click the “Pay Now” button to begin payment.
- Please submit payment the same day you submit the online application. Applications received without payment will NOT be processed.

### Fee and Summary Report

Your application data has been submitted. Click on “View PDF Summary Report” and print this report for your records.

You are required to pay the amount below for your application to be processed.

Press “Pay Now” to proceed to the fee payment page.

Press “Add to Cart” to Add to Shopping Cart and return to the main menu.

<table>
<thead>
<tr>
<th>Fees</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOJ - Hard Card Processing Fee:</td>
<td>$32.00</td>
</tr>
<tr>
<td>RN Endorsement Application Fee:</td>
<td>$350.00</td>
</tr>
<tr>
<td>FBI - Hard Card Processing Fee:</td>
<td>$17.00</td>
</tr>
</tbody>
</table>

**Total Amount Due:** $399.00

Due to varying processing times, please allow appropriate processing time for the initial evaluation of your application. Once your application has been evaluated, your application status will be updated in your online BreeZe account. Processing times may vary, depending on the receipt of documentation from academic programs, agencies and other states or countries. Current processing times can be found here: [http://jrn.ca.gov/notes.shtml](http://jrn.ca.gov/notes.shtml)

The Application for Licensure by Endorsement fee is an earned fee, therefore, if an application is found ineligible, the application fee is not refunded.

**NOTE:** Fees are subject to change and the fees shown above are used as an example and may be different for your own application.
After submission of payment, a copy of your payment receipt will be available on your BreEZe profile home page, shown below.
Checking Your Application Status

- After submitting an Endorsement application, you may check your current status from your BreEZe account homepage by clicking on the “Details” button under the “View Application Status” heading.

- Please consult our current Processing Times at [http://www.rn.ca.gov/times.shtml](http://www.rn.ca.gov/times.shtml) for the dates in which we are currently processing applications before contacting the Board for details regarding your application status.
Checking Your Application Status (cont’d)

- When clicking on the “Details” button, if there are no deficiencies listed, this means your application has not yet been evaluated. If there are deficiencies listed, your application has been evaluated and is awaiting receipt of additional requirements.

- Please consult our current Processing Times at http://www.rn.ca.gov/times.shtml for the dates in which we are currently processing applications before contacting the Board for details regarding your application status.
Checking Your Application Status (cont’d)

- Upon application approval, your RN license information will be shown in the top right corner of your BreEZe profile home page, seen below. Your license information will also be viewable to the public on our online license verification system at [https://search.dca.ca.gov/](https://search.dca.ca.gov/)

- The “Manage your license information” menu allows you to submit a Change of Address application for your license, as well as other items.

- NOTE: The Board will no longer issue physical pocket cards upon initial licensure or renewal of an RN license and advanced practice certificates. License statuses can change at any time during a two-year renewal cycle. A license status can change from Active to Inactive, Inactive to Active, and can be disciplined which will change the license status. The most up to date information about licenses and certificates is available through our online search system. Changes made to a license status are immediately reflected on the BreEZe system. Employers can verify license status online 24 hours a day, 7 days a week. Wall Certificates will continue to be issued to licensees, only at the time of initial licensure.