



**This form cannot be used to renew your license.**

## Inactive to Active License

There are 2 methods to submit this form:

1. To set your INACTIVE Registered Nurse, Clinical Nurse Specialist, Nurse Practitioner, Nurse Midwife, or Nurse Anesthetist license to ACTIVE, complete and submit this form along with any documentation by e-mail to: **brn-inactive@dca.ca.gov**
2. If you are updating a **FURNISHING** number to Active, you must **MAIL** this form with \$12 payment (CURES fee) to the Board at: **PO BOX 944210, SACRAMENTO CA, 94244**

Full Name: _____	Phone Number: _____
Mailing Address: _____	Email address: _____
City, State, Zip: _____	
License(s) to set from <b>INACTIVE to ACTIVE</b> :	RN #: _____ PHN #: _____
NP #: _____	Nurse Midwife #: _____
NP Furnishing #: _____	NMW Furnishing #: _____
CNS #: _____	Nurse Anesthetist #: _____
<b>FAILURE TO COMPLETE ITEMS 1 - 4 BELOW WILL DELAY OR PREVENT YOUR REQUEST</b>	
<b>1. CONTINUING EDUCATION CERTIFICATION</b>	
Have you successfully completed 30 hours of Board approved continuing education ( <i>for RN license only - taken within the past two years</i> ) as required for active status? <b>YOU MUST SUBMIT A COPY OF YOUR CE CERTIFICATE(S) WITH THIS FORM.</b>	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>2. FINGERPRINT REQUIREMENT (See page 2 for information)</b>	
Have you complied with the fingerprint requirement?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>3. LICENSE DISCIPLINE AND/OR CONVICTIONS (See page 2 for information)</b>	
Since you last renewed your license, have you had a license disciplined by a government agency or other disciplinary body; or, have you been convicted of any crime in any state, the USA and its territories, military court or other country?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>4. DUPLICATE WALL CERTIFICATE (OPTIONAL)</b>	
If you would like to order a new wall certificate, <b>there is a \$60 fee per wall certificate which must be mailed to the Board with this form</b> (limit one per certificate type).	
<b>5. SIGNATURE REQUIRED</b>	
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	
_____	_____
Signature of Licensee	Date

**NOTE:** This does not extend the expiration date of your RN license. The same expiration date will apply and another 30 hours of continuing education will be required at the time of renewal.

## FINGERPRINT REQUIREMENT

A licensee who does not have fingerprints on file must be fingerprinted as directed by the Board. **THIS REQUIREMENT APPLIES TO REGISTERED NURSES LICENSED PRIOR TO 2014 UNLESS SUBSEQUENTLY FINGERPRINTED BY THE BOARD.** Failure to submit a set of fingerprints, if required or directed, by the date required for your renewal is grounds for discipline by the Board.

- Check "YES" to certify compliance with the fingerprint requirement.
- Check "NO" to certify non-compliance with the fingerprint requirement.

**NOTE:** If you check "NO" or fail to check either box, your renewal application is considered incomplete and your license is not eligible for renewal.

Please refer to the "Fingerprint Requirement for License Renewal" section (<http://www.rn.ca.gov/licensees/ren-fp.shtml>) of the Board's website for additional information and instructions.

## REPORTING LICENSE DISCIPLINE AND/OR CONVICTIONS

Check the box next to "YES" if since your last renewal, you have had a license disciplined by a government agency or other disciplinary body, or have you been convicted of any crime. "Conviction" includes a plea of guilty or no contest and any conviction that has been set aside or deferred pursuant to Sections 1000 or 1203.4 of the Penal Code, including infractions, misdemeanors, and felonies. You do not need to report a conviction of an infraction with a fine of less than \$1,000 unless the infraction involved alcohol or a controlled substance. You must, however, disclose any convictions in which you entered a plea of no contest and any convictions that were subsequently set aside or deferred pursuant to Sections 1000 or 1203.4 of the Penal Code. "License" includes permits, registrations, and certificates. "Discipline" includes, but is not limited to, suspension, revocation, voluntary surrender, probation, reprimand, or any other restriction on a license held by you.

Check the box next to "NO" if since your last renewal you have not had a license disciplined by a government agency or other disciplinary body, or have you been convicted of any crime.

If "YES" please provide the following information for each license discipline or conviction sustained:

1. A detailed written explanation describing the circumstances and events that led to your license discipline, arrest(s) and conviction(s).
2. Documents relating to your license discipline or disciplinary actions taken against any other license by a government agency or disciplinary body.
3. Certified documents relating to the arrest, such as: police report, arrest report, booking report, complaint, citation or ticket.
4. Certified Court documents, such as: Notice of Charges, Complaint, or Indictment; Plea Agreement, Sentencing Order, Probation Order, or Judgment; Dismissal, Probation Release, or Court Discharge.
5. Related mitigating evidence or evidence of rehabilitation.

The requested information must be provided to the Board within 30 days from the date of renewal. Upon receipt and review of this documentation, the Board will determine what, if any, disciplinary action will be taken against your license.