

**Professional Licensing Agency**  
 402 West Washington Street  
 Room W072  
 Indianapolis, IN 46204



**Eric J. Holcomb**  
*Governor of Indiana*  
**Lindsay M. Hyer**  
*PLA Executive Director*

**CE Sponsor – Occupational Therapy Renewal Form**

Renew online at [MyLicense.IN.gov](http://MyLicense.IN.gov) or send this form to the office address shown on the top left corner. To renew online, click the 'Register a Business' link to create login credentials using the license number and registration code provided on your renewal notice. To renew by mail, please complete this form in its entirety and submit it along with a copy of the advertising brochure for your Occupational Therapy CE programs to the office address above, allowing 4 weeks for processing.

<b>LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address</b>		
Licensee Name	License Number	Expiration Date
Street Address		
City	State	Zip Code
Phone Number	Email Address	
<b>LICENSEE AFFIRMATION</b>		
My signature below indicates our desire to renew the CE Sponsor registration for another year and that we agree to periodic monitoring of our programs.		
Signature of Officer	Date (month, day, year)	

**Required Documentation:** If we do not receive the required or correct documentation your renewal application may be denied.  
 (1) Advertising Brochure: You must include a copy of your advertising brochure with details on courses to be provided.

Visit us on the web at [www.pla.in.gov](http://www.pla.in.gov).

<b>FOR OFFICE USE ONLY</b>		
Renewal Fee	Receipt No.	Date