



ARKANSAS STATE BOARD OF NURSING

1123 S. University Avenue, Suite 800, University Tower Building, Little Rock, AR 72204
Phone: 501.686.2700 Fax: 501.686.2714 www.arsbn.org

Dear Licensure Applicant,

Thank you for submitting your Arkansas State Board of Nursing (ASBN) Application for Licensure. The information contained in this material is for you to use if you have ever been convicted of a misdemeanor or felony, pled guilty or nolo contendere to any charge in any state or jurisdiction. This material is designed to provide you with information and identify documentation that you must submit to ASBN as part of your application process.

The ASBN requires all applicants for nursing licensure to answer specific screening questions as identified on the Examination or Endorsement Application. In addition, all applicants must submit their fingerprints for a state and federal criminal background check.

In the event that you have responded "yes" to respective screening question(s) and/ or have a positive result on either of the criminal background check(s), you are required to submit documentation to the ASBN. If you answer "yes" to respective screening question(s) and/ or have a positive result on either of the criminal background check(s) and do not provide the required documents, your application will not be considered by the ASBN until you provide the required documents.

You are required to report all misdemeanor and felony convictions that occurred in Arkansas or any other state or jurisdiction, regardless of when they occurred, even if adjudication is withheld. DWI/DUIs and similar offenses must be reported. An offense(s) must be reported even if a suspended imposition of sentence occurred, or is a juvenile, sealed or expunged offense.

Applications are reviewed and investigative cases are opened in the order that they are received. Please read the information carefully and provide all required documentation. Additional documentation may be required on a case-by-case basis. Failure to submit a complete application, correct application fee(s), and required documents will delay review of your licensure application. An investigative case will not be complete for final review and action until you have provided all required documentation.

The ASBN is unable to provide a specific timeframe regarding processing of your application. Review is on a case-by-case basis and may take longer depending on the nature of your offense(s), the rate at which you submit required documentation and the volume of applications received by ASBN.

A formal Board hearing may be required depending on the nature of your offense(s); such offenses are identified in the ASBN *Nurse Practice Act* in Arkansas Code, Act 1208 of 1999 Legislative Session- ACA 17-87-312.

Sincerely,

Arkansas State Board of Nursing Staff

Arkansas State Board of Nursing

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CRIMINAL BACKGROUND CHECK INFORMATION

GENERAL INFORMATION

A complete application and correct amount of required fee(s) must be submitted to the ASBN office before your application will be processed and an investigative case will be opened. An incomplete application or an application that is received without the correct fee amount will not be processed and will be returned to the mailing address provided on your application. Instructions for completing the Examination or Endorsement Application are located on our website at www.arsbn.org. Click on the Forms tab.

You should be forthcoming and honest when answering the ASBN Examination or Endorsement Application screening questions. The criminal background check conducted by ASBN is very thorough and offenses may appear on the report that may not have appeared in previous reports that you have had conducted.

You are encouraged to review the ASBN *Nurse Practice Act* and *Rules* located on our website at www.arsbn.org. According to the ASBN *Nurse Practice Act* (Sub Chapter Section 3- 17-87-312), no person who shall be eligible to receive or hold a license issued by the board if that person has pleaded guilty, nolo contendere, or been found guilty of any of the offenses (as identified in Arkansas Code Annotated 17-87-312).

ACA § 17-87-312 provides the applicant an opportunity to request a waiver of eligibility criteria related to a criminal background in certain circumstances depending on the offense(s). However, certain offense(s) are considered a permanent bar to licensure in Arkansas and an individual with one or more of these offense(s) are not eligible to apply for a waiver. You should review the ASBN *Nurse Practice Act* (Sub Chapter section 3- 17-87-312) at http://www.arsbn.arkansas.gov/lawsRules/Documents/SUBCHAPTER_3.pdf

For examination applicants, a temporary permit will not be issued and permission to take (Authorization To Test) the National Council Licensure Examination® (NCLEX®) will not be extended until completion of the investigation and eligibility has been determined.

For additional information you may refer to the [Criminal Background Frequently Asked Questions](#) located on our website at www.arsbn.org. Click on the Licensing Tab.

DOCUMENTATION

You are required to submit documentation the ASBN if you respond “yes” to respective screening question(s), if notified that you have a positive criminal background check report(s) or as directed by the ASBN.

The required documentation shall be submitted to the ASBN address as identified at the top of your application, **Attention Education Department**.

Court documents and behavioral evaluation reports, if required by ABSN, must be submitted directly to the ASBN, **Attention Education Department**, from the respective court or agency.

1. Personal Documentation

You must attach a personal letter of explanation to the Application. The self explanatory letter should identify the timeline of offense(s) and describe each offense in your own words. You should discuss specific information in the letter including but not limited to the circumstances related to the offense(s), behavior(s) that led to offense(s), and your conduct since. If applicable, you should discuss any rehabilitative efforts since the offense(s). The letter needs to be legible and may be handwritten or typed. Please sign and date the letter and submit it as identified herein.

2. Court Documentation

You will need to contact the court in the county where each of your offense(s) occurred and request them to submit a certified copy of each of your offenses to the ASBN address as identified at the top of your application, **Attention Education Department**.

You will need to request a certified copy of documentation for all offenses that reflects:

- Charge(s)/conviction(s);
- Disposition of charge(s) (order, judgment, fine(s), community service, probation, sentence, or deferred orders); and
- Evidence that the conditions of the court/restitution has been met (i.e. all fines paid in full, parole/probation terms complete etc.)

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CRIMINAL BACKGROUND CHECK INFORMATION

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Important notes:

In the event that any of your offenses are identified as a bar for licensure, the statute number of the offense must be included on the respective court document or submitted to ASBN from the court. You may need to specifically request that the statute number is reflected on your court documentation.

The name(s) on your documents should match the name(s) on your application. If the name(s) on your court document(s) are different from the name(s) that you have listed on the ASBN Application, you will be required to provide documentation that validates the name(s) on the court document(s). Such documentation used to validate your name(s) would include a copy of a marriage license, divorce decree or other court ordered documentation officially reflecting your name change.

If a case number(s) on your court documentation does not reflect the actual name of the respective offense(s), you will be required to obtain documentation that will reflect the association of the case number to the offense.

In the event that your offense(s) have been officially sealed or expunged you must have the court submit the order to seal documentation or order of expungement documentation to ASBN for review. You must mark "yes" on the ASBN application screening question regarding a prior conviction.

In the event that your offense(s) occurred as a juvenile, you should contact the juvenile division of the court in the county where the offense(s) occurred to obtain a letter regarding the status of your offense(s).

If court records have been purged or destroyed, you will need to request that the court submit a letter to the ASBN that reflects that a records search was conducted for identified timeframe and the outcome.

All criminal convictions, deferred orders, dismissed orders, suspended imposition of sentence orders, and/ or adjudication orders must be reported to the board; including those from another state or jurisdiction.

3. Rehabilitative Documentation

You must provide documentation to the ASBN if you have responded "yes" to either of the application screening questions regarding current drug related behavior or participation in a chemical or alcohol dependency treatment/rehabilitation program.

You need to request that documentation is submitted to the ASBN address as identified at the top of your application, **Attention Education Department**.

Documentation that needs to be submitted should include information such as:

- Verification of treatment for substance abuse;
- Rehabilitative program completion;
- Admission summary;
- Discharge summary;
- Recommendations;
- Verification of compliance with aftercare recommendations; and
- Evidence of continuing sobriety, support group, etc.

Important notes:

The ASBN may require that you have an addictive behavioral evaluation completed based on the nature of your response(s) and /or the nature of your offense(s). If the ASBN requires an addictive behavioral evaluation, you will be notified of the requirement. You will be provided with a list of evaluators that provide these services. We do not recommend one over the other. Be aware that the evaluation must be completed by a person who specializes in addiction, and credentialed appropriately. The evaluation must consist of an in-depth psychological/addiction evaluation (performed by a physician, psychiatrist, psychologist and/or Psychiatric Mental Health Certified APN, who specializes in addiction disorders) sent directly to the Board. The evaluation must note that the evaluator has read the letter that the ASBN will send to you. The Board will not accept evaluations that are done by social workers.

4. Board Documentation

You must provide documentation to the ASBN if you have responded "yes" to the application screening question regarding discipline or voluntarily surrender of your license, certificate or privilege to practice in any state or jurisdiction or if it is determined that you have had discipline in another state or jurisdiction. This includes any license or certificate (CNA, Pharmacy, massage, etc.).

You will need to request that the respective Board of Nursing submit documentation to the ASBN address as identified at the top of your application, **Attention Education Department**.

Documentation that needs to be submitted should include:

- Copy of Facts and Finding from the respective Board of Nursing;
- Evidence of completion of respective Board of Nursing's stipulations; and
- Evidence of reinstatement of license.

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CRIMINAL BACKGROUND DOCUMENTATION CHECKLIST

Use the following, non inclusive checklist to guide you through the process for submission of documents to the ASBN.

- _____ Submit completed Examination Application form and fee submitted to ASBN.
- _____ Attach a personal letter of explanation to the ASBN Application. The letter should include information as explained herein.
- _____ Submit complete state and federal criminal background checks and fees. Results are valid for one year. State forms may be downloaded from our website at www.arsbn.org and the Federal form may be requested from our website; click on the Forms Tab. Nursing programs provide the forms to graduate candidates.
- _____ A copy of your marriage license, divorce decree or other court ordered documentation reflecting name change if the name(s) on your application and court documents do not match. Have certified copies of each of your offenses submitted to the ASBN as identified herein.
- _____ Have certified copies of each of your offenses submitted to the ASBN as identified herein.
- _____ Court documents that contain information as identified herein, including evidence that the conditions of the court / restitution has been met for all offenses.
- _____ Court documents contain the statute number if the offense is listed as a bar for licensure.
- _____ Submit documents associated with rehabilitative and/ or treatment program information, if applicable, as identified herein.
- _____ Submit documents associated with a respective Board of Nursing's action on your license or privilege to practice, if applicable, as identified herein.