

South Carolina Department of Labor, Licensing and Regulation

South Carolina Board of Examiners in Opticianry

110 Centerview Dr. • Columbia • SC• 29210 P.O. Box 11329 • Columbia • SC• 29211-1329

Opticianry Requirements for Reactivation of Inactive License and Application Process

This Application is not used for Reinstatement of Lapsed Licensure or Lapsed Apprenticeship Registration

Opticianry Inactive Licensure Reactivation

A person is qualified to reactivate an Inactive certificate of licensure if the following requirements are met:

- Submission of a completed application and payment of licensure fee(s).
- Submission of Continuing Education from the time frame the license was Inactive.
- Currently holds current, Inactive status, South Carolina Optician Licensure.

Application Process

Your application is good for one (1) year from the date of receipt. If all required information is not received within this one (1) year period; you must begin the application process from the beginning. This includes, but is not limited to, the application fee, Continuing Education, etc.

- 1. <u>Application</u> In addition to the a completed application, the following must also be sent:
 - a. Check or money order only, in the amount indicated below, payable to SC Opticianry Board (Fees are non-refundable). A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds. NO CASH IS ACCEPTED
 - i. Optician License Reactivation Fee:
 - In-State: \$80Out-of-State: \$0
 - Out-of-State. 50
 - ii. Contact Lens License Reactivation Fee:
 - In-State: \$40
 - Out-of-State: \$0
 - b. Copy of your valid Driver's License, State Issued ID, or Passport
 - c. Legal documentation for name change (marriage certificate, divorce decree, etc.)
 - d. Continuing Education Certificates
- 2. Continuing Education:
 - a. <u>Optician Licensure</u>- Documentation of four (4) hours of ABO approved Continuing Education for every year the license has been inactive.
 - b. <u>Contact Lens Dispensing</u>- Documentation of one (1) hour of NCLE approved Continuing Education obtained for every year the license has been inactive.

Once your application has been approved, you will be emailed with updates regarding licensure status. You may check the current status of your application online by visiting the board's website at https://www.llr.sc.gov/opti/



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Phone: 803-896-4681 • Contact.Opticianry@llr.sc.gov • Fax: 803-896-4715
llr.sc.gov/opti

Optician Reactivation of Inactive License Application

Submit the following with your application to the address above:

• Check or money order only made payable to the SC Board of Opticianry. (Fees are non-refundable)
A returned check fee of up to \$30, or an amount specified by law, <u>may</u> be accessed on all returned funds.

 Copy of your valid Driver's License, State Issued ID or Passport If you have changed your name, include a copy of legal documentation 				
Fees: Optician License Reinstatement: In-state: \$80 Out of State: \$0 Out of state/inactive: Contact Lens License Reinstaten In-state: \$40 Out of State: \$0	nent fee:			
License Number:	☐ Optician ☐	Contact Lens		
PERSONAL INFORMATION				
Full Name:	Prior Last	Name(s):		
Home Address:(Street, City, State & Zip Code)				
Mailing Address:(If different than above)				
(If different than above) Business Address:				
Phone: Email Address	ss:			
CONTINUING EDUCATION Optician: Documentation of four (4) hours of ABO approved continuing education for every year the				
license has been lapsed. Contact Lens Dispenser: Documentation of one (1) hour of NCLE approved continuing education obtained for every year the license has been lapsed.				
Have you met the CE requirement for the time period the	license has been la	psed? ☐ Yes ☐ No		

DISCIPLINARY QUESTIONS

	any "Yes" answers. If you answer "Yes" to a conviction; you will also need to describe any pending characteristic criminal background check from your state of residence and state(s) of licensure (i.e., SLED, etc.).	rges in addi	10n
1.	Since you last held an active license, have you been convicted of or pled guilty or nolo contendere to a felony of any kind or to a non-felony crime involving drugs or moral turpitude (You may exclude juvenile court convictions or expunged crimes.)?	☐ Yes	□ No
2.	Since you last held an active opticians license, have you had a license denied, restricted or disciplined by any other licensing board or national certifying body? If yes, a copy of the final order to be sent directly to the Board.	□ Yes	□ No
3.	Since you last held an active opticians license, have you had any mental, emotional, and/or physical condition, including alcohol or other substance abuse that may presently interfere with your ability to competently and safely perform the essential functions involved in this profession?	□ Yes	□ No
I F tru tru	TTESTATION HEREBY swear/affirm I have read all questions on this reinstatement application and hauthfully, accurately, and completely. I hereby acknowledge that failure to answer these athfully, accurately and completely shall constitute cause for the initiation of disciplinary ainst my South Carolina license.	questions	ed
 Sig	enature Date		

Answer all the questions below; you are required to include a detailed written statement of explanation with your application

PRIVACY DISCLOSURE

South Carolina Law requires that every individual who applies for an occupational or professional license provide a social security number for use in the establishment, enforcement and collection of child support obligations and for reporting to certain databanks established by law. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Social security numbers may also be disclosed to other governmental regulatory agencies and for identification purposes to testing providers and organizations involved in professional regulation. Your social security number will not be released for any other purpose not provided for by law.

Other personal information collected by the Department for the licensing boards it administers is limited to such personal information as is necessary to fulfill a legitimate public purpose. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on the application may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act, and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical services.