



NC Board of PT Examiners

Request for License Verification to another State

Fee \$30.00 per State

Make check payable to: NCBPTE

Mail to: NC Board of Physical Therapy Examiners 8300 Health Park Suite 233 Raleigh, NC 27615

Name: _____

License Number: P _____ A _____

Licenses Verification to be forwarded to the following State(s): _____

If you have questions, please contact the Board office at 919-490-6393.

You can also consider using our online services section of the Board website at www.ncptboard.org to complete this process electronically

The North Carolina Board of Physical Therapy offers the following online services:

