

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



Michael R. Pence
Governor of Indiana
Nicholas W. Rhoad
PLA Executive Director

BOARD OF CHIROPRACTIC EXAMINERS CHIROPRACTIC GRADUATE STUDENTS INFORMATION AND INSTRUCTION SHEET

Before completing and submitting your application to our office, please read all materials and information included.

APPLICATION AND INFORMATION TO DOWNLOAD

Applicants must download the following documents and information from the website at www.pla.in.gov:

1. Application For Chiropractic Graduate Student
2. Information and Instructions
3. Statutes and Administrative Rules which pertain to the practice of chiropractic

IPLA ADDRESS/PHONE NUMBER/FAX/EMAIL/WEBSITE

Indiana Professional Licensing Agency
ATTN: Board of Chiropractic Examiners
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Staff Phone: (317) 234-2054
FAX #: (317) 233-4236
Staff Email: pla8@pla.in.gov
Website: www.pla.in.gov

DEFINITIONS

"Graduate Student" means a student in the final year of course work at a chiropractic school or college.

"Supervisor" is a chiropractor licensed in the state of Indiana who acts as the direct supervisor and overseer of the educational process for the graduate student.

REQUIREMENTS FOR THE ISSUANCE OF A GRADUATE STUDENT PERMIT

The requirements for the issuance of a graduate student permit are as follows:

Submission of an application completed by the graduate student and the supervisor which shall include the following information:

- Name and license number of the supervisor.
- Supervisor's practice location.
- Beginning and ending dates of graduate program.

Certification from the chiropractic school that the applicant is enrolled in the final year of course work by submission of an original school transcript or an original letter from the dean of the school.

THE FAIR INFORMATION PRACTICE ACT

In compliance with Ind. Code 4-1-6, this agency is notifying you that you must provide the requested information, or your application will not be processed. You have the right to challenge, correct, or explain information maintained by this agency. The information you provide will become public record. Your examination scores and grade transcripts are confidential except in circumstances where their release is required by law, in which case you will be notified.

MANDATORY DISCLOSURE OF U.S. SOCIAL SECURITY NUMBER

Your social security number is being requested by this state agency in accordance with Ind. Code 4-1-8-1 and 25-1-5-11(a). Disclosure is mandatory, and this record cannot be processed without it.

Failure to disclose your U.S. social security number will result in the denial of your application. Application fees are not refundable.

ABANDON APPLICATIONS

If an applicant does submit all requirements within one (1) year after the date on which the application is filed, the application for licensure is abandoned without any action of the Board. An application submitted subsequent to an abandoned application shall be treated as a new application.

ISSUANCE OF CHIROPRACTIC GRADUATE STUDENT PERMIT

Upon issuance of your student permit by the Board, you will be sent an email notifying you that your permit has been issued. There will be instructions on how to purchase a blue license card to be mailed to you.

This service will be available on our website at www.in.gov/pla/license.htm.

Your chiropractic supervisor and chiropractic school will be notified of the issuance of your permit by email/mail. This notification will include the permit number, date of issuance, expiration date and the location of practice.

DUTIES OF THE SUPERVISOR

The duties of the Supervisor are as follows:

- The supervisor of a graduate student shall hold an Indiana chiropractic license which is current and in good standing.
- A supervisor shall supervise no more than one (1) graduate student at any given time.
- The supervisor shall develop a training schedule in coordination with the school or college of chiropractic that will be followed by the graduate student throughout the education process.
- Chiropractors who supervise graduate students shall be exclusively responsible for the direct supervision of the graduate student.
- Upon successful completion of the educational program, the supervisor shall provide the Board with a letter stating the graduate student has completed a program from beginning date to ending date.

DUTIES OF A GRADUATE STUDENT

The duties of the Graduate Student are as follows:

- A graduate student shall not provide an independent diagnosis of a patient.
- A graduate student will be required to maintain a log of chiropractic procedures that shall be reviewed daily by the supervisor and shall be available for review by the Board at the Board's request.

CHIROPRACTIC LICENSURE APPLICATIONS

If you wish to apply for an Indiana chiropractic license, applications are available to download from the Professional Licensing Agency website at www.pla.in.gov.

CHIROPRACTIC GRADUATE STUDENTS APPLICATION INSTRUCTIONS

All applicants must submit an application and supporting documentation to:

Indiana Professional Licensing Agency
ATTN: Board of Chiropractic Examiners
402 West Washington Street, Room W072
Indianapolis, Indiana 46204

APPLICATION

Complete, typewritten (or legibly printed) application.

GRADUATE STUDENT

The graduate student must complete and sign the section marked "graduate student".

SUPERVISOR

The supervisor must complete and sign the section marked "supervisor".

CERTIFICATION FROM CHIROPRACTIC COLLEGE

Certification from the school that the applicant is enrolled in the final year of course work. Please have the school send an original transcript or an original letter from the dean of the school which shows that the applicant is enrolled in the final year of course work. **This must be submitted directly to the Board from the school.**