

**APPLICATION FOR LICENSURE VIA ENDORSEMENT
GUIDE FOR AN APPLICANT FROM A STATE WITH LOWER STANDARDS THAN KENTUCKY**

- Download and print the [Application for Licensure as a Massage Therapist](#). Type or print the application information legibly. Be sure the form is completely filled out. Failure to answer each question completely will result in delays.
- Check the yes/no answer related to felonies and misdemeanors. If yes, attach court documents that explain the disposition of your case.
- List each current license, registration or certification and attach verification.
- Check the yes/no answer related to disciplinary action. If you answer yes, attach disciplinary documents that explain disposition of your case.
- Check the yes/no answer related to disciplinary review in another state. If you answer yes, attach an explanation.
- List each massage school attended and provide official transcripts sent directly from the school.
- Provide a certified statement from your current credentialing body (eg. licensing board) showing that you are in good standing, and have it submitted directly from the credentialing body.
- Submit any other documents that show of evidence your training and experience. Possible documents include:
 - Copies of continuing education transcripts or certificates not included in initial training
 - Certified transcript of healthcare related academic coursework
 - Proof of teaching massage-relevant coursework
 - Research
 - Clinical internships
 - Publications
 - Massage therapy leadership positions
 - Evidence of hands-on therapeutic massage or bodywork sessions, such as Log or Appointment books or Employer verification of experience

NOTE: Hands-on experience must equal at least 4 years in lieu of other evidence.

- Request that licensing/certifying exam results be sent directly to the board from the agency who administers the exam. NOTE: Copies sent by you may be considered “unofficial.”
- In the presence of a Notary, sign and date the application.
- Enclose the *non-refundable* Application Fee of \$125.00 by either check or money order.
- Mail your application to the correct address.

USPS, certified, return receipt requested, mail to:	Overnight & Special Mailing such as UPS, FedEx, etc.
KBLMT Division of Occupations and Professions P.O. Box 1360 Frankfort, KY 40602	KBLMT Division of Occupations and Professions 911 Leawood Dr. Frankfort, KY 40602

- Check to be sure that your license verification has been posted online within seven days of the KBLMT Board meeting. Go to <http://.bmt.ky.gov> and verify that it is correct.