



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

ACTIVE DUTY MILITARY SPOUSE RECOGNITION OF OUT-OF-STATE LICENSE INSTRUCTIONS

Submit this application to transfer your license if you are a spouse of an active duty military service member who has been recently stationed in Texas. You must hold a substantially equivalent license from another state jurisdiction and want authorization to engage in a business or occupation for 3 years.

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in black ink.

1. NAME – Provide your legal name in the spaces provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and III. (Mr. is not a suffix)
2. SOCIAL SECURITY NUMBER (SSN) – Social Security Number disclosure is required by Section 231.302(c)(1) of the Texas Family Code in order to obtain a license. Your Social Security Number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:
www.texasattorneygeneral.gov/child-support or call (512) 460-6000 or (800) 252-8014
3. DATE OF BIRTH – Provide your birthdate.
4. GENDER – Select whether you are male or female.
5. PHONE NUMBER – Provide a telephone number, including the area code where we can reach you during the day. This may be your office phone number where we can leave a message.
6. EMAIL ADDRESS – Provide your email address only if you agree to the following statements: By providing my email address I authorize the Texas Department of Licensing and Regulation (TDLR) to send licensing communications and require notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address or I will not receive these notices. I understand that the email address I provide on this application will be available to the public.
7. MAILING ADDRESS – Provide your current mailing address. This is the address where we will send you mail. A post office box can be used as a mailing address. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately. Always keep your mailing address current with TDLR. A license renewal notice will be mailed to your address of record before the date your license will expire.
8. PHYSICAL ADDRESS – This is the physical location of your residence. Do not use a post office box for this address.
9. LICENSE INFORMATION – Provide license information.
10. BUSINESS INFORMATION – Provide business information if you are applying for a business license. Attach a completed copy of the license application for a business.
11. CRIMINAL HISTORY – Select Yes or No. Indicate if you have ever been convicted of, or placed on deferred adjudication for, any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a Criminal History Questionnaire for each offense. Failure to include this documentation will delay the processing of your application. This form can be obtained from the TDLR website at www.tdlr.texas.gov/MISC/lic002.pdf. If you are worried your criminal history could prevent you from getting this license, you may have your criminal history evaluated before submitting your application and non-refundable fees by submitting the following: (1) Criminal History Evaluation Letter, (2) a completed Criminal History Questionnaire form for each crime you were convicted of, or placed on deferred adjudication for, (3) and a \$25 fee. You can find more information on the process and download the necessary forms on the TDLR website at www.tdlr.texas.gov/crimHistoryEval.htm. **Criminal History Checks are not performed for the Intent to Practice letter.**
12. DISCIPLINARY ACTION HISTORY – Select Yes or No. Indicate if you have ever had an occupational license (this does not include your Driver's license), certification, or registration suspended, revoked, or denied in any state. If you have, complete and attach a Disciplinary Action Questionnaire for each disciplinary action. This form can be obtained from TDLR's website at <https://www.tdlr.texas.gov/misc/Disciplinary%20Action%20Questionnaire.pdf>.

13. **REQUIRED DOCUMENTATION** – Please attach the following documentation:

Permanent change of station orders

Copy of spouse's military identification card

Proof of your spouse's active duty military service:

- Copy of appropriate documentation of military status or;
- Active duty orders.

Proof of marital status:

- Copy of Defense Enrollment Eligibility Report System (DEERS) verification (DD Form 1172-2).
- Other supporting documentation of marital status.

Copy of current license from another jurisdiction.

Verification letter from issuing jurisdiction.

NOTE: See TDLR website for specific operational license requirements <https://www.tdlr.texas.gov/licenses.htm>.

Select the desired option to receive a 3-year license or a letter of intent to practice. (By opting to receive a letter of intent to practice, you will not be issued a license.)

If an option is not selected, this application will be processed as a license request.

3-YEAR LICENSE OPTION	3-YEAR LETTER OPTION
You will be issued a 3-year Texas license	You will be issued a letter confirming your authority to practice in Texas
No application fee	No application fee
No examination	No examination
Requires criminal history background check	No criminal history background check
Non-renewable	Non-renewable
Expires 3 years after issuance	Expires 3 years after issuance
Becomes invalid if spouse leaves military service or is no longer stationed in Texas	Becomes invalid if spouse leaves military service or is no longer stationed in Texas
After expiration or invalidation, you will have to apply and meet standard licensing requirements to obtain a license.	After expiration or invalidation, you will have to apply and meet standard licensing requirements to obtain a license.

14. **STATEMENT OF APPLICATION** – Carefully read the statement of applicant before you sign and date your application.

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

Texas Department of Licensing and Regulation
P.O. Box 12157
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application and all attachments.

For additional information and questions, please visit the Texas Department of Licensing & Regulation website at <https://www.tdlr.texas.gov> or reach Customer Service via web form. The webform will allow you to submit your request for assistance and include attachments needed at <https://www.tdlr.texas.gov/help/>. You may also reach us at (800) 803-9202 [in state only], (512) 463-6599, Relay Texas-TDD: (800) 735-2989 or Fax: (512) 463-9468. Customer Service Representatives are available Monday through Friday 7:00 a.m. until 6:00 p.m. Central Time (excluding holidays).



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ACTIVE DUTY MILITARY SPOUSE RECOGNITION OF OUT-OF-STATE LICENSE

This application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in black ink. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper.

Submit this application if you are requesting authorization to engage in a business or occupation in the state of Texas for 3 years. This license will **NOT** be renewable. **Application fees and examination requirements are waived.**

You must hold an active substantially equivalent license in another state.

1. Name: _____
Last, First, Middle (Suffix, Jr., Sr., III)

2. Social Security Number: _____ <small>(See instruction sheet for disclosure information)</small>	3. Date of Birth: _____ <small>Month/Day/Year</small>	4. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
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5. Phone Number: _____ <small>(Area Code) Phone Number</small>	6. Email Address: _____ <small>(ex: johndoe@email.com) See instruction sheet for disclosure information</small>
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7. Mailing Address: (P.O. Box is allowed for this address)

Number, Street Name, Apartment Number, City, State, Zip Code

8. Physical Address: (P.O. Box is not allowed for this address)

Number, Street Name, Apartment Number, City, State, Zip Code

9. LICENSE INFORMATION

State License is issued by: _____	Current License #: _____	Expiration Date: _____ <small>Month/Day/Year</small>	Texas License you are seeking: _____
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10. BUSINESS INFORMATION

Business Name: (Can only be 45 characters, including spaces) _____	Federal ID #: _____
Business Phone Number: _____ <small>(Area Code) Phone Number</small>	Business Fax Number: _____ <small>(Area Code) Phone Number</small>
Business Physical Address: (P.O. Box is not allowed for this address) _____ <small>Number, Street Name, Apartment Number, City, State, Zip Code</small>	

11. Have you ever been convicted of or placed on deferred adjudication for any misdemeanor or felony, other than a minor traffic violation? If YES, complete and attach a Criminal History Questionnaire for each offence. Yes No

12. Have you had an occupational license, certification, or registration suspended, revoked, or denied in any state? (This does not include your drivers license). If YES, attached a Disciplinary Action Questionnaire to this application. Yes No

13.

REQUIRED DOCUMENTATION

Please attach **ALL** of the following required documentation:

- Copy of spouse's military identification card
- Permanent change of station orders

- Proof of your spouse's active duty military service:
 - Copy of appropriate documentation of military status or;
 - Active duty orders

- Proof of marital status:
 - Copy of Defense Enrollment Eligibility Report System (DEERS) verification (DD 1172)
 - Other supporting documentation of marital status.

- Copy of current license from another jurisdiction.
- Verification letter from issuing jurisdiction.

NOTE: See TDLR website for specific license requirements <https://www.tdlr.texas.gov/licenses.htm>.

I hold a substantially equivalent license from another jurisdiction and desire:

- A 3-year non-renewable license or;
- A letter of intent to practice. **(By checking this box, you are opting for a letter and WILL NOT receive a Texas license)**

If an option is not selected, this application will be processed as a license request.

14.

STATEMENT OF APPLICANT

I certify that I will comply with all applicable laws and rules related to my licensed occupation or profession. I further certify that all information I have provided is true and correct. I understand that providing false information may result in denial of this application and/or revocation of the license.

Date

Signature