



MILITARY RECIPROCITY WAIVER APPLICATION

Instructions: With the passage of SB670, active duty military personnel or their spouse, licensed or certified in any occupation or profession, upon receiving notice of orders for military transfer or honorable discharge to Oklahoma may apply for reciprocal licensure with no application fee or license fee for the first year by submitting this form with their original application documentation for the following licenses. Ensure all required documentation is attached and mail to the address shown on this form.

SELECT OCCUPATIONAL LICENSE TYPE

- Body Piercer (BP)
- Hearing Aid Dealer and Fitter (HADF)
- Licensed Genetic Counselor (LGC)
- Licensed Midwife (MIDW)
- Medical Micropigmentologist (MEDMIC)
- Registered Professional Sanitarian (RPS)
- Registered Professional Environmental Specialist (RPES)
- Tattoo Artist (TATT)

APPLICANT INFORMATION

Applicant Name: _____
Last First Middle

Mailing Address: _____
Street Address

_____ City _____ State _____ Zip

Phone #: _____ Cellular #: _____ Alternate #: _____

County: _____ E-mail: _____

WAIVER INFORMATION

As proof of meeting the military reciprocity requirements, please submit copies of one of the following:

- Military transfer orders to Oklahoma
- Honorable Discharge to Oklahoma

And also include:

- Copy of a valid Military ID

READ CAREFULLY The applicant signing this application being duly sworn declares that the foregoing statements are true to the best of their knowledge and that they personally signed this application. Submitting this form is not an application for the license types listed on this form. (Note: Retain a copy of form for your files.)

Signature: _____ Date: _____

OSDH License #: _____ OSDH Receipt #: _____ Receipt Date: _____