

**THIS FORM IS REQUIRED FOR ALL OWNERS, BOARD OF
DIRECTORS AND ADMINISTRATORS**

**SOCIAL SECURITY NUMBER AND
PERSONAL INFORMATION SUPPLEMENT**

ATTENTION: PLEASE READ CAREFULLY

A.R.S. § 25-320(P) mandates that each licensing board or agency that issues professional or occupational licenses or certificates must obtain and record the social security number of an applicant for professional or occupational license or certificate. Therefore, it is mandatory that you provide your social security number on the enclosed Social Security Number Supplemental form and return it to the Board with your application.

To assist the Board in complying with this statute, we are providing this supplemental form for your social security number and personal information.

Institutional Name: _____

Name: _____

Home Address: _____

Home Phone: _____

Social Security Number: _____

PLEASE NOTE:

**THE ABOVE INFORMATION IS CONSIDERED "CONFIDENTIAL
INFORMATION" AND NOT A PART OF THE "PUBLIC RECORD".
ACCORDINGLY, ALL INFORMATION IS MAINTAINED IN
CONFIDENTIAL STATE BOARD FILES.**

August 2009