

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY 🔹 GAVIN NEWSOM, GOVERNOR

DEPARTMENT OF CONSUMER AFFAIRS 1625 N. Market Blvd, Sacramento, CA 95834 www.dca.ca.gov





FEDERAL PROFESSIONAL LICENSE PORTABILITY AND STATE REGISTRATION

Professional License Portability and State Registration Portal for Servicemembers and their Spouses- User Guide

Document Purpose

The purpose of this document is to outline general instructions for servicemembers or their spouses to submit a registration request to register their practice in a licensed profession or vocation in California under the terms of the federal Servicemembers Civil Relief Act (SCRA).

The federal Servicemembers Civil Relief Act (SCRA) authorizes service members or their spouses who currently hold a valid license in good standing in another state to practice in California within the same profession or vocation, if they are required to relocate to California because of military orders.

For individuals who desire to practice in California under the terms of the SCRA, the State of California adopted a state registration process to help implement the license portability provisions of the SCRA.*

The requirements to register with the State are compatible with the requirements to practice under the SCRA, but state registration provides important additional benefits to servicemembers or their spouses, namely State verification and recognition that they are lawfully practicing in California.

For licensed professions or vocations regulated by the boards and bureaus within the California Department of Consumer Affairs (Department or DCA), the Department developed a Federal Professional License Portability and State Registration online registration portal to allow for easy submission of the required documentation. <u>Please click here to review the boards and bureaus within the</u> <u>Department</u>. Before you register, please note that individuals eligible to practice in California under the SCRA and register with the California Department of Consumers Affairs must meet the following criteria:

- Hold a professional or vocational license in good standing in another state, district, or territory of the United States
- Relocate to California because of military orders for military service
- Use the out-of-state license at some point during the two years immediately preceding relocation to California (e.g., perform at least one activity within the scope and under the authority of the out-of-state license)
- Maintain in good standing all other valid and active out-of-state licenses in the same profession or vocation
- For spouses/domestic partners, maintain marriage or other legal union with a servicemember subject to military orders for military service

Be prepared to provide the following information during the registration process:

- A copy of the military orders requiring relocation to California
- Written or online verification that all active and valid out-of-state licenses within the same profession or vocation are in good standing
- For spouses or domestic partners, evidence of current marital or other legal status with a servicemember subject to military orders described above
- California address of record
- Attest that you meet registration requirements and the information provided is accurate.

The following information will be made publicly available for individuals registered with the State of California as practicing under the terms of the SCRA:

- Individual name
- California address of record
- State registration status
- State name and out-of-state license number

For a list of the individuals registered to practice in California under the SCRA, please click <u>DCA Search</u> (View the PROFESSIONAL LICENSE PORTABILITY AND STATE REGISTRATION LIST FOR SERVICEMEMBERS AND THEIR SPOUSES).

Further resources for members of the United States Armed Forces

1. Submitting a Registration Request – Initial Security Submission

To submit registration, follow the general steps below.

- a. Navigate your web browser to <u>Professional License Portability and State</u> <u>Registration Portal for Servicemembers and their Spouses</u>.
- b. The portal will present its first security protocol. Proceed through the reCAPTCHA by clicking the checkbox and identifying the picture category stated. Figure 2.1



c. Read the introduction and answer the eligibility questions. The questions are presented to offer a pre-submission of general eligibility. DCA wants you to find the right program for your situation. If this program is not correct for your situation, please find other resources <u>here</u>. Answer the questions and click 'Next'.

Eligibility Questions Are you requesting to practice as a teacher, attorney, real estate agent, emergency medical technician, or paramedic?* O Yes O No Are you a military servicemember or married to, or in a domestic partnership or other legal union with, a military servicemember? O Yes O No Are you relocating to California because of military orders? * O Yes O No Do you hold a current professional or vocational license in good standing in a jurisdiction outside of California (another state, district, or territory of the United States)? * O Yes O No Have you actively used the license during the two years immediately preceding the relocation to California? ("Actively used" means an individual used the license at some point or performed at least one activity within the scope and under the authority of the license). * O Yes O No California Department of Consumer Affairs

Federal Professional License Portability and State Registration Portal User Guide (v 11-2023) d. Read the checklist and other requirements that you may be required to provide, click the checkbox next to 'I have read the checklist and I am ready to proceed.' And click 'Next'.

Checklist
Your responses indicate you may be eligible for state registration. Once you submit your initial information a link will be sent to the email address provided to complete the registration process.
When registering you will be required to upload the necessary documents. Please review the following checklist and have all items ready to submit.
Required Information:
Military orders requiring relocation to California
• Written or online verification that all valid or active out-of-state licenses within the same profession or vocation are in good standing (e.g., free of disciplinary restrictions)
 For spouses or domestic partners, evidence of current marital or other legal status with a servicemember subject to military orders described above
California address of record (the publicly available address at which you will receive official communications)
 Attest that you meet registration requirements and the information provided is accurate.
I have read the checklist and I am ready to proceed. *

e. Select the Board or Bureau associated with your profession or vocation.

Profession or Vocation		
Select the Board or Bureau associ	ated	with your profession or vocation. *
Select one	Ŧ	

f. Select your specific profession or vocation from the list.

Select the profession or vocation for which you are seeking to practice in California. *

Select	t one	~

NOTE: If you cannot find the Board, Bureau, profession or vocation please <u>visit our webpage</u> to find the appropriate resources.

g. Enter the personal information requested and click 'Next.

Please enter the information below. The email provided will be used to send you a link to complete the registration process.

1a. First Name *
Name
1b. Middle Name
1c. Last Name *
Doe
2a. Date of Birth (MM/DD/YYYY) *
01/01/2001
2b. Phone Number *
(916) 555-1212
2c. Email Address *
test@test.com

h. Review the information that you have provided. If correct, click 'Next', if not click 'Back' to modify the data.

Please review the following responses for accuracy before submitting. To edit responses click "Back" to return to the previous pages. Once you have reviewed the information and are ready to submit, click "Submit". You will be redirected to SimpliSign, a secure signature platform to sign your request.

Eligibility Questions:

Are you requesting to practice as a teacher, attorney, real estate agent, emergency medical technician, or paramedic? No Are you a military servicemember or married to, or in a domestic partnership or other legal union with, a military service member? Yes

Are you relocating to California because of military orders? Yes

Do you hold a current professional or vocational license in good standing in a jurisdiction outside of California (another state, district, or territory of the United States)? Yes

Have you actively used the license during the two years immediately preceding the military required relocation to California? ("Actively used" means an individual used the license at some point or performed at least one activity within the scope and under the authority of the license.) Yes

License Type:

Select the Board or Bureau associated with your profession or vocation: Demo Board (for Testing) Select the License Type for which you are seeking practice in California: Demo LT

Personal Information:

Name: J Doe Date of Birth: 01/01/2002 Phone Number: (916) 555-1212 Email Address: m@m.com

i. Submit the initial request by clicking 'Submit'. The following on-screen notification will confirm the initial submission. Figure 9.1



Name: Test Person Email: Transaction ID: FPLP-000347

Subject: California Department of Consumer Affairs Federal Professional License Portability and State Registration

Dear Test Person,

Thank you for your request to use the Federal Professional License Portability and State Registration online process. An email with a secure link to complete the registration process has been sent to the email address you provided. If you did not receive the email, please check your spam filter. If you have not received the email after 24 hours, contact us at the phone number or email below.

Thank you,

Demo Board (for Testing)

916-555-1212

www.dca.ca.gov

Security Step: The portal will send an email to the address that you provided. Click the link in the email to access and complete your registration. The remainder of the process will ask you for more information, including document upload(s), and redirect you to a secure digital signature platform called SimpliSign before you officially submit the registration.

2. Submitting a Registration Request – Primary Submission

a. Click the 'Access your registration here' link from the email you received in step #1 above.

The portal welcomes you back and presents the information that you have already entered. You may choose to change all of the information except 'Board or Bureau', 'Profession or Vocation', or your email. If any of these need to change, please start a new registration request from the beginning.

When all the information is correct, click 'Next'.

Enter your California address of record. This is the address in California where you will receive official correspondence. Click 'Next' to proceed.
 NOTE: These address fields are not mandatory. If you do not provide a California address here, the Board or Bureau will require one before the registration request can be processed.

California Address of Record	
3. Find Address (to autocomplete, or enter address	below)
Type to Search	
3a. Street Address	
3b Apartment/Unit/Suite Number	
#	
3c. City	
Select one 👻	
3d. State	
CALIFORNIA -	
3e. Zip Code	

c. Enter the military orders related information, including uploading a copy of the military orders and, if a spouse or domestic partner, a copy of documentation (marriage certificate, domestic partnership, etc.). Click 'Next' to proceed.

Military Orders (Required)

Are you the Spouse or Domestic Partner (or other legal union) of a Military Servicemember, or are you the Military Servicemember? *

○ I am the Military Servicemember.

• I am the Spouse or Domestic Partner (or other legal union) of a Military Servicemember.

Please upload a copy of your documentation (marriage certificate, domestic partnership, etc.). *

Select files...

Military Orders Begin Date *

MM/dd/yyyy

Military Orders End Date or End of Military Service Date (enter the earlier date) *

MM/dd/yyyy

Upload a copy of the military orders for military service in California. *

Select files...

d. Enter your licensure information for all active licenses within the same profession or vocation for which you are requesting registration. Select how many licenses you hold, and that number of identical licensure information sections will display. Enter all data for all licenses and click 'Next' to proceed.

Verification of Valid Licensure in Other Jurisdiction(s)
In how many states are you currently licensed (only include current and active licenses)? *
2 -
Licensure Information (1)
1a. State *
Select one 👻
1b. License Number *
1c. Expiration Date *
MM/dd/yyyy
1d. Is this license in good standing? *
Select one 👻
1e. Upload (1) your license verification, (2) a letter of good standing or (3) documentation from an online licensing system. * Multiple file uploads allowed
Select files
Licensure Information (2)
2a. State *
Select one 💌
2b. License Number *
2c. Expiration Date *
MM/dd/yyyy
2d. Is this license in good standing? *
Select one 👻
2e. Upload (1) your license verification, (2) a letter of good standing or (3) documentation from an online licensing system. * Multiple file uploads allowed

- e. Complete the required affidavit by clicking the box next to each statement signifying your agreement and attesting to each statement. Click 'Next' to proceed.
- f. Review all of your answers on the review page. If you need to modify any answer, click 'Back' and change your entry. When ready, click 'Submit' to proceed to the secure, electronic signature platform SimpliSign to sign your registration request and submit it to the Board or Bureau.
 - a. NOTE: This process may take several minutes as the portal prepares the documents.
- g. Sign your request by clicking the blue box labeled 'Signature'. You may view the entire document by scrolling up and down. The document includes all of your answers and all documents that you uploaded.

	military servicemember and I relocated to California because of my military orders for military service in California.	spouse's or partner's
For All Appli	cants:	
~	I hereby certify under penalty of perjury under the laws of the State statements made herein are true in every respect and that misstater material facts may result in the board or bureau not accepting this su ineligible to practice in California.	of California that all nents or omissions of ubmission or in me being
INFORMATIC	N COLLECTION, ACCESS, AND OTHER IMPORTANT DISCLOSU	RES <u>:</u>
	Civil Code section 1798.17 requires that you receive the following in AGENCY NAME: Department of Consumer Affairs TITLE OF OFFICIAL RESPONSIBLE FOR INFORMATION MAINTE ADDRESS: 1625 North Market Blvd. Sacramento, CA 95834	formation. ENANCE: Director
🖉 Sign 🖉 Sig	nature *	
		Refer to eSignature Date
APPLICANT S	IGNATURE	DATE
First Last		
APPLICANT P	RINTED NAME	-

h. Type your name in the box provided to sign your submission. Click 'Click to Sign' to proceed.

	Your electro	nic signature	×
	т Туре	lu Draw	
Sign Here			
	Sian	Hono	
Add backgrour	nd	11000	🔟 Clear
			Click to Sign

i. Click 'Sign Agreement' to finalize the process and submit your request to the board or bureau.



j. You will receive the following on-screen acknowledgement and information. The portal will also send an email with similar information to the address provided. The email will include an attachment of your complete, signed registration request.

CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS
Federal Professional License Portability and State Registration
Name: Test Person
Email:
Transaction ID: FPLP-000347
Subject: Department of Consumer Affairs Federal Professional License Portability and State Registration
Dear Test Person,
An email containing a copy of your signed submission has been sent to you for your records. If you did not receive the email, please check your spam filter first. If you have not received an email after 24 hours, contact the Board/Bureau at the phone number or email below. Your registration is under review and the Board/Bureau will contact you if further information is required. Please allow up to 30 days for Board/Bureau review of completed submissions.
Thank you,
Demo Board (for Testing)
916-555-1212
www.dca.ca.gov

NOTE: If you are unable to complete the electronic signature process, the portal will send an email with a link to sign the submission. This link can be used to access the signature process until it is signed, or the signature request expires after 1 year.

3. What if the Board or Bureau Requires More Information?

If the Board or Bureau that regulates your specific profession or vocation requires clarification or more information, you will receive an email outlining the specific topic areas. Examples of submission deficiencies may include:

• You did not provide a California address.

Or

• The copy of your military orders was not clear.

Click on the access link in the email communication.

a. If you did not provide a California address, the screen below will appear for your entry. Once the address is complete, click 'Next' to proceed.

Address of Record	Submission Review	Submission Resubmit	Submit
California A	ddress of Recor	d	
3. Find Address (to autocomplete, or e	enter address below)	
Type to Search	ı		
3a. Street Addres	55		
3b Apartment/U	nit/Suite Number		
#			
3c. City			
Select one	-		
3d. State			
CALIFORNIA	Ŧ		
3e. Zip Code			
		Sav	ve Next

b. The 'Submission Review' tab summarizes the areas or specific information that to be provided. The information h ملا مرا مريد

needs to be provided. The information here is very similar to the information
provided in the email and can be used as a reference. Click 'Next' to proceed.

Submission Review
Submission Review Status
Incomplete Submission (Deficient)

The Submission is incomplete for the following reason(s):

- The uploaded military orders are missing or not acceptable.
- The professional license(s) in good standing is missing or not acceptable.
- Evidence of marriage to, or in a domestic partnership or other legal union is missing or not acceptable.
- A California Address of Record is missing or not acceptable.
- Other (see comments below)

Reviewer comments - Incomplete These comments will be visible in the email to the Requester.

Please provide a clear copy of your military orders.

c. The 'Submission Resubmit' tab allows you to respond to the request, ask a question or withdraw your request. NOTE: Withdrawing your request will end the process.

> c1. To respond to the request and provide the requested information, choose 'Respond to the Request' in the dropdown menu. Add comments to clarify your submission and upload requested files by clicking the 'Select files..' button. Click 'Next' to proceed.

Save

Back

Next

Submission Rev	iew Resubmit/
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Resubmit Response *
Respond to the Request
Resubmit Date
11/21/2023
Resubmit Comments
Add comments here.
Resubmit Upload(s) (optional)
Select files

c2. To ask a question of the board or bureau staff, choose 'Ask a Question' in the dropdown menu. Add your questions in the 'Resubmit Comments' box. Click 'Next' to proceed.

Submission Review Resubmit		
Resubmit Response *		
Ask a Question	•	
Resubmit Date		
11/21/2023		
Resubmit Comments		
Add questions here.		

c3. To withdraw your request, choose 'Withdraw' in the dropdown menu. Click 'Next' to proceed.

d. Click 'Submit' to process your response to the board or bureau.

Click 'Submit' below to process requested changes.

Save Print Back Sub	mit
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e. You will receive the following on-screen acknowledgement and information. The portal will also send an email with similar information to the address provided.





Subject: California Department of Consumer Affairs Federal Professional License Portability Submission and State Registration

Dear Test Person,

Thank you for submitting the additional requested information and/or clarification for your submission. The information has been transmitted to the Board/Bureau.

Your registration is under review and the Board/Bureau will contact you if further information is required. Please allow up to 30 days for Board/Bureau review of completed submissions.

Thank you,

Demo Board (for Testing)

916-555-1212

www.dca.ca.gov

NOTE: The deficient request scenario outlined above may occur several times until your request is complete. Please respond as promptly as possible so we can process your request expeditiously.

Your Federal Professional License Portability and State Registration request is now complete, and the board or bureau staff aim to process your registration request within 30 days. You will get an email with the request's disposition. If your registration is accepted or found to be not eligible, the resulting email will have a letter attached.

Accepted registration requests will have their information posted to our registrant list located at search.dca.ca.gov. The list is titled "Professional License Portability and State Registration List for Servicemembers and their Spouses".

END OF DOCUMENT