



PROFESSIONAL DEVELOPMENT REQUIREMENT WAIVER APPLICATION

WAIVER POLICY

If a Registry member is unable to obtain the required 15 clock hours of annual professional development training due to major medical issues or catastrophic family circumstances, a waiver may be requested. Waivers will be considered on a case-by-case basis by the Registry Review Committee. Professional Development Requirement Waivers may be granted for one year. Members must submit the TAPP Waiver Request Form to: TAPP Registry Review Committee, P. O. Box 808, State University, AR 72467. ***Waiver requests will be accepted 60 days prior through 60 days after individual registry renewal dates.*** Documentation is required (such as a letter from a physician, letter from employer, Family Medical Leave Act – FMLA documentation from current employment, etc.).

REGISTRY MEMBER INFORMATION

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Home Phone: () _____ Email Address: _____

Registry ID Number: _____ Registry Renewal Date
(located on TAPP membership card): _____

DETAILED REQUEST

Please state the reasons for a waiver of required annual professional development hours.
(SUPPORTING DOCUMENTATION MUST ACCOMPANY THIS APPLICATION.)

Registry Member's Signature

Date

Please note, further documentation may be requested by the Registry Review Committee.