



THIS APPLICATION MUST BE TYPED OR PRINTED IN BLACK INK

INSTRUCTIONS – STUDENT LICENSE APPLICATION

- Please read this form before completing. This form must be typed or printed legibly in black ink. It must be sent to the board by the massage therapy school, program, or board approved mentor.
- Enclose a \$25.00 application fee made payable: "Missouri Board of Therapeutic Massage" (Payment must be in the form of a check or money order) ALL FEES ARE NON-REFUNDABLE
- Affix a photograph of the student in the space provided to the right of this section.
- A student license may be issued upon notification by the school, program, or board approved mentor that the student has demonstrated substantial progress and competency, as approved within the course of instruction, with a grade "C" or better in basic hygiene, universal precautions, contraindications, basic massage theory, basic massage hands-on practice, and review of the results of a criminal background check.
- Pursuant to § 620.127, RSMo, disclosure of the applicant's social security number (SSN) is mandatory. The board will not publicly disclose the student's SSN without the student's consent, unless such disclosure is permitted by federal or state law. However, state law allows the board to disclose the student's SSN in connection with any civil, criminal, administrative or arbitral proceeding, in an investigation in anticipation of litigation, pursuant to a court order, and in the performance of a statutory or constitutional duty or power. The board can also disclose the student's SSN to another government agency (federal, state or local) and to a private person or entity acting on behalf of, or in cooperation with, a state entity. State law requires the board to provide the student's SSN to child support and tax compliance officials.

AFFIX PHOTOGRAPH
2 X 2

Photo must be within the last 2 years showing head and shoulders

SECTION I – APPLICANT INFORMATION

STUDENT NAME (LAST, FIRST, MIDDLE, SUFFIX)				
SOCIAL SECURITY NUMBER (Required)		DATE OF BIRTH (Month/Day/Year)		HOME TELEPHONE NUMBER
RACE (Voluntary)			GENDER (Voluntary)	
HOME STREET ADDRESS			CITY	STATE ZIP
E-MAIL ADDRESS			FAX NUMBER	
LOCATION OF PRACTICE SITE			PRACTICE SITE TELEPHONE NUMBER	
PRACTICE SITE ADDRESS			PRACTICE SITE CITY	STATE ZIP

SECTION II - APPLICANT BACKGROUND

<i>APPLICANT MUST ANSWER THE FOLLOWING QUESTIONS BY PLACING AN "X" OR CHECK MARK IN THE APPLICABLE BOX. IF A BOX IS CHECKED "YES" THE APPLICANT MUST SUPPLY A DETAILED, WRITTEN EXPLANATION ON A SEPARATE SHEET OF PAPER REGARDING THE RESPONSE WITH THE APPLICATION.</i>	YES	NO
1. Have you ever been issued a professional license, certification, registration, or permit by any state, United States territory, commonwealth, or District of Columbia? If yes, below please list from where, license/certificate number, status of license, and status. State _____ License number _____ Status _____	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever been denied a professional license, certification, registration, or permit by any state, country, United States territory, commonwealth or the District of Columbia?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever had any professional license, certificate, registration, or permit revoked, suspended, placed on probation, or otherwise subject to any type of disciplinary action, restriction, or voluntarily surrendered under threat of investigation or disciplinary action? If "yes", explain on a separate sheet of paper.	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you presently being investigated or is any disciplinary action pending against any professional license, certification, registration or permit you hold? If "yes", explain on a separate sheet of paper.	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you ever been arrested, charged, subject to prosecution, indicted, found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of any state or of the United States whether or not sentence was imposed? Applicants must answer "yes" even if a suspended imposition of sentence or suspended execution of sentence was received/ordered. A. If "yes", are you currently on probation?	<input type="checkbox"/>	<input type="checkbox"/>
6. Are you now or have you in the last five years been addicted to any drug or chemical substance including alcohol?	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you ever been arrested, charged, convicted, subject to prosecution for, indicted, found guilty by a court, pled guilty or pled nolo contendere to any traffic offense resulting from the use of drugs or alcohol? Applicants must answer "yes" and provide a written explanation even if a suspended imposition of sentence or suspended execution of sentence was received/ordered. A. If "yes", are you currently on probation?	<input type="checkbox"/>	<input type="checkbox"/>
8. Do you have a medical condition which would in any way impair or limit your ability to perform the duties of a massage therapist with reasonable skill and safety?	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you ever been a party in a civil suit that was medically related? If yes, explain on a separate sheet of paper?	<input type="checkbox"/>	<input type="checkbox"/>

Instructions Application for Student License

SECTION I – APPLICANT DATA

This information must be completed by the student. If the student will be practicing at the school/program clinic, entering the school/program name in the Location of Practice Site is required and the remaining subsections can be left blank. A mentorship must include information regarding the address and telephone number for the practice site.

SECTION II – APPLICANT BACKGROUND

This information must be completed by the student. A “yes” response to any of the questions requires a written explanation. All responses must be printed or typed on a separate sheet of paper and include a clear, concise explanation, Incomplete or poorly written responses will result in the application being returned to the student for more information and delay the review process.

Question 10 addresses compliance with Missouri state income taxes and must be completed by the student. Finally, the application form must be signed and dated by the student.

SECTION III – EDUCATION INFORMATION

This section must be completed by a representative of the massage therapy school/program or mentor. The form must be notarized if the school/program has no seal or if the education is provided by a mentor.

BACKGROUND CHECK

An applicant for licensure must submit to a criminal background check pursuant to section 324.267 RSMo of the licensure law that states, “Any applicant for a license to operate a massage business or a license to practice massage therapy shall authorize the board to conduct a criminal background check...The cost of such background check shall be paid by the applicant.” If an applicant submitted a criminal background check while provisionally licensed and the results are less than one year old, a second criminal background check is not required.

Section 43.543 RSMo of Missouri law authorizes state agencies to conduct a background check with the Missouri State Highway Patrol and the Federal Bureau of Investigation.

Missouri’s vendor for digital fingerprinting is Cogent with fingerprint sites located throughout Missouri. Cogent will accept debit or credit cards or on-site payment by check, money order, or cash. If cash is to be paid, an applicant must have the exact amount as the vendor may not have change available.

- ✓ With the new registration system, all applicants will log into the Missouri Automated Criminal History Site (MACHS) at www.machs.mo.gov. An appointment to be fingerprinted must be made online via MACHS. The automated registration system walks an applicant through the steps to make an appointment. If an applicant does not have internet access, s/he can call 877/862-2425 and a representative will make the online appointment.
- ✓ An applicant must have the four digit registration number. This registration number is 5407 for individuals applying for student, provisional, full, or business licensure in massage therapy. The registration number ties all agency identifying information together to insure the background check response is returned to the correct agency.

- ✓ Once the registration process is complete, an applicant will receive a Transaction Control Number (TCN) that is used to track the appointment. Applicants need to take the transaction control number document to the fingerprinting site along with a current photograph.
- ✓ Applicants must have a recent photograph to present to the vendor prior to being fingerprinted.

At the fingerprinting appointment, applicants will be fingerprinted and have their photos taken. A receipt containing the TCN is provided after printing is completed. A copy of this receipt is to be sent to the board office to verify the background check is in process. The results of the fingerprinting will be sent directly to the agency office.

PLEASE BE ADVISED THAT UNTIL THE RESULTS OF THE BACKGROUND CHECK IS RECEIVED AND REVIEWED BY THE BOARD, A LICENSE WILL NOT BE ISSUED.

AGENCY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as a job or license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notice and other information and that the results of the check are handled in a manner that protects the applicant's privacy.

- Officials must provide to the applicant written notice¹ that his/her fingerprints will be used to check the criminal history records of the FBI.
- Officials using the FBI criminal history record (if one exists) to make a determination of the applicant's suitability for the job, license, or other benefit must provide the applicant the opportunity to complete or challenge the accuracy of the information in the record.
- Officials must advise the applicant that procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- Officials should not deny the job, license, or other benefit based on information in the criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the criminal history record solely for the purpose requested and cannot disseminate the record outside the receiving department, related agency, or other authorized entity.²

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant notice, what constitutes "a reasonable time" for the applicant to correct or complete the record, and any applicant appeal process that is afforded the applicant. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of criminal history records for noncriminal justice purposes.

If you need additional information or assistance, contact the CJIS Audit Unit, Missouri State Highway Patrol CJIS Division, at (573) 526-6153 extensions 2630, 2625 or 2655.

¹ Written notification includes electronic notification, but excludes oral notification.

² See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history record of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.²

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

¹ Written notification includes electronic notification, but excludes oral notification.

² See 28 CFR 50.12(b).

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).