



THE STATE  
of

**ALASKA** *Department of Commerce, Community, and Economic Development  
Division of Corporations, Business and Professional Licensing*

**Professional Licensing**

PO Box 110806, Juneau, AK 99811

Phone: (907) 465-2550

Email: [License@Alaska.Gov](mailto:License@Alaska.Gov)

Website: [ProfessionalLicense.Alaska.Gov](http://ProfessionalLicense.Alaska.Gov)

## Authorization to Discuss Professional License Application and Information

Division staff is authorized to communicate only with the applicant. If the applicant is using a credentialing agency or is accepting assistance from a staffing or employment agency, division staff must have a signed release from the applicant to discuss the application and share information on file.

To authorize communication, complete this form and file with your application.

### PART I Applicant/Agency Information

|                        |  |                  |  |
|------------------------|--|------------------|--|
| Name of Applicant:     |  |                  |  |
| Program:               |  |                  |  |
| Applicant Email:       |  | Applicant Phone: |  |
| Authorized Agency:     |  | Agency Phone:    |  |
| Authorized Individual: |  | Email:           |  |

### PART II Signature

I hereby authorize staff of the Alaska Division of Corporations, Business and Professional Licensing to share and exchange information relating to my licensing application with the above-named authorized agency and individual.

This release applies to status updates, documents, and any other information required to complete my application for licensure in the State of Alaska.

☐ I give permission for you to discuss the contents of my license file with the above-named person until the date my license is issued.

☐ I give permission for you to discuss the contents of my license file with the above-named person until I withdraw permission.

|                      |  |       |  |
|----------------------|--|-------|--|
| Applicant Signature: |  | Date: |  |
|----------------------|--|-------|--|

#### Information for credentialing, staffing or employment agencies:

- Licensing staff will respond to no more than two inquiries from agencies each month. Every effort will be made to respond to inquiries quickly, please allow 10 business days for this request to be processed.
- Applicants are emailed with a status update and may contact staff to query application status at any time.
- The division will not accept applications that list an agency address as the practice address and will likewise not accept the telephone numbers or email addresses for such agencies as the applicant's own. The division may only accept those addresses, phone numbers, and email addresses if the applicant is actually practicing in that office. Alaska law requires the applicant to provide their information, not the agency information.