Oklahoma Board of Nursing
2915 N. Classen Blvd., Suite 524
Oklahoma City, OK 73106
(405) 962-1800
www.ok.gov/nursing

APPLICATION FOR A DUPLICATE POCKET LICENSE CARD

Instructions: Please complete the application form and have the form notarized. You must submit the application form with the fee of **$25.00** in the form of a personal check, money order, or certified check. All fees are nonrefundable.

_____ _____ _____
Date Social Security# Date of Birth

_____ (Check one) _____ _____
OK Certificate # RN LPN

Name_____
First Middle Maiden Married

Mailing Address_____

_____
City State Zip Code Telephone #

I REQUEST A DUPLICATE OF MY POCKET LICENSE CARD FOR THE REASON STATED BELOW:

_____

_____

_____

If a license card is lost, stolen or destroyed, the licensee must submit written evidence of the situation. Only one duplicate card may be issued [OAC 485: 10-7-6 and 485: 10-9-6].

AFFIDAVIT

You must sign the below affidavit in front of a notary public. Do not print.

I hereby certify that I am the licensee listed above and that the statements contained in this document are true and correct.

Signature of Licensee_____
FIRST MIDDLE MAIDEN MARRIED

Subscribed to and sworn before me this _____day of _____,Year_____.

_____ _____
My commission expires Signature of Notary Public

(NOTARY SEAL)