

## STATE OF ARIZONA BOARD OF BEHAVIORAL HEALTH EXAMINERS 1740 WEST ADAMS STREET, SUITE 3600

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KATIE HOBBS Governor TOBI ZAVALA Executive Director

## ACCESS TO INFORMATION

A.R.S. § 32-3206 requires the Arizona Board of Behavioral Health Examiners ("Board") to notify the behavioral health professional who is the subject of an investigation, of their ability to request a copy of their investigative report.

## IMPORTANT NOTICE

A behavioral health professional who obtains this information from the Board may not release it to any other person or entity (except the behavioral health professional's attorney) or use it in any proceeding or action, except in connection with the Board's review of the investigation, the disciplinary interview and any administrative proceedings or appeals related to the disciplinary interview or hearing.

A person who violates this provision of law commits an act of unprofessional conduct and may be disciplined by the Board. A.R.S. § 32-3206(C)

		, re	equest that the Board provide a copy of the following investigation
report:			
	Licensee/Applicant Name	e:	
	Complaint number (if app	plicable):	
	Attorney Name (if applic	able):	
	Board meeting date:		
	Requestor Email:		
	Requestor Phone:		
	1		
Please	provide the report via emai	l to (documents	will only be released to the Licensee/Applicant or their Attorney):
	Me	Email:	
	My Attorney		
	Both parties (co	mplete both ema	ail addresses)
			would prefer to pay with a check or money order, please complete
his fo	rm and mail or hand deliver	to the Board's	office with your payment.
By sig	ning and submitting this f	orm, I authoriz	ze the Board to release confidential investigative documents as
	ed above.	,	
	Signature:		Date:
	_		
		AYMENT INF	FORMATION – INTERNAL USE ONLY
	Authorization		Payment date