

Mississippi State Board of Physical Therapy



Public Records Request Form

Name: _____ Date: _____

Employers Name (If Applicable): _____

Address: _____

Phone Number: _____ E-Mail Address: _____

Board orders are in paper form only. A disciplinary action list can be sent either by e-mail or paper form.

1. E-Mail _____
2. Paper Copies _____

Specific records requested: _____

These records will be used for (brief explanation): _____

There is a minimum \$10.00 processing fee per item on all requested documents in addition to the following fees:

8 1/2" x 11" \$1.00/per page

Please make check or money order payable to Mississippi State Board of Physical Therapy (MSBPT). Both the form and fee(s) are needed to fulfill the request.

Part 3101 Chapter 5 of the Regulations contains pertinent information regarding public records request and additional fees.

If you have any questions regarding this form, you may call 601-352-2918.