TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

Control N	o. <u>850</u>	_ Department : <u>Alab</u>	ama State Board of S	ocial Work Examiners	
Rule No	850-x-5	06 Processing Fees			
<u>X</u>	New	Amend	Repeal	Adopt by Reference	
Would the	e absence of	the proposed rule sig	znificantly		
harm or endanger the public health, welfare, or safety?				No	
Is there a	reasonable i	relationship between	the		
state's po	lice power a	nd the protection of t	the		
public health, safety, or welfare?				No	
is there ar	nother, less i	restrictive method of			
regulation	available th	at could adequately i	protect	. 5	
the public	?			<u>No</u>	
Does the p	oroposed rul	le have the effect of d	lirectly		
or indirect	tly increasing	g the cost of any good	ls or	. 1	
services in	volved and,	if so, to what degree	?	No	
		if any, more harmful			
		hat might result from	ı the	> 2/A	
absence o	f the propos	ed rule?			
		ulemaking process de	-		
		of, and so they have,		ر ام	
their prima	ary effect, th	ne protection of the p	ublic?	<u>Yes</u>	
*****			**********		
Does the p	proposed rule	e have an economic i	mpact?	No	
If the prop	osed rule ha	is an economic impac	t, the proposed rule	is required to be accompanied by	a fiscal note prepared in
			n 41-22-23, <u>Code of A</u>		
Certification	on of Author	ized Official			
				ll compliance with the requireme	•
			s to all applicable fiļin	g requirements of the Administra	tive Procedure Division of the
Legislative	Reference S	ervice.			
Signature o	of certifying	officer <u>Sua</u>	and de	olden	
Date	June 12, 20	<u> </u>		(DATE FIL	ED)

(STAMP)

Alabama State Board of Social Work Examiners

NOTICE OF INTENDED ACTION

AGENCY NAME:

Alabama State Board of Social Work Examiners

RULE NO. & TITLE:

850-X-5-.06 Processing Fees

INTENDED ACTION:

Identify the fees for processing forms and other requests

SUBSTANCE OF PROPOSED ACTION:

Informing the licensees and applicants of the various processing fees

TIME, PLACE, MANNER OF PRESENTING VIEWS:

August 12, 2014, 9:30 AM, Public Hearing 100 North Union Street, Suite 732, Montgomery AL 36104

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

Written or oral comments may be sent to Alabama State Board of Social Work Examiners at: 100 North Union Street, Suite 736, Montgomery AL 36130-1620. All written and oral comments must be received by August 12, 2014.

CONTACT PERSON AT AGENCY:

Brenda W. Holden, 334-242-5860

Brenda Holden

CHAPTER 850-X-5 FEES

850-X-5-.06 Processing Fees. The Board shall charge the following processing fees.

Renewal of License and Certification	\$100.00					
Reinstatement of License	\$500.00					
Inactive Registration	\$ 25.00					
Application Fees:						
Examination	\$ 75.00					
Re-Examination	\$ 75.00					
Reciprocity	\$ 75.00					
Private Independent Practice	\$ 75.00					
Printing for Replacement License	\$ 10.00					
Documentation Copying Fee	\$ 1.00 per page					
Processing Verification Form	\$ 15.00					
Application for CE Provider	\$ 50.00					
Replacement of I.D. Card	\$ 5.00					
Replacement of Gold Seal	\$ 5.00					