



# RESPIRATORY CARE BOARD OF CALIFORNIA

3750 Rosin Court, Suite 100, Sacramento, CA 95834

T: (916) 999-2190 | Toll-Free: (866) 375-0386 | F: (916) 263-7311

E: [rcbinfo@dca.ca.gov](mailto:rcbinfo@dca.ca.gov) | [www.rcb.ca.gov](http://www.rcb.ca.gov)



## RESPIRATORY CARE PRACTITIONER APPLICANT WORK PERMIT REQUEST

The Respiratory Care Board of California (RCB) may issue a Respiratory Care Practitioner Applicant Work Permit to qualified applicants who are completing the remaining examination requirement for licensure.

**Important Notice: You must have a valid RCB work permit or license to practice respiratory care in California. Practicing without one is unlicensed practice and punishable by law. An NBRC credential, including the CRT, does not authorize practice in California.**

### Eligibility Requirements:

- You have submitted a complete application for licensure to the RCB.
- You have been issued a CRT credential by the NBRC.
- You have secured a potential employer in California.

A Respiratory Care Practitioner Applicant Work Permit allows you to work only during the dates listed on the permit and only under the direct supervision of a California-licensed RCP. It does not constitute licensure to practice respiratory care in California. Once the permit expires, you must immediately stop practicing unless you have been issued an RCP license by the RCB.

---

### APPLICANT INFORMATION

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Number/Street/Route City State Zip

---

### EMPLOYER INFORMATION

Facility Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Number/Street/Route City State Zip

Facility Representative's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Requested Start Date: \_\_\_\_\_

---

I declare under penalty of perjury under the laws of the State of California that the information provided in this request and any attached documents is true and correct. I understand that:

- I may not practice respiratory care in California without a valid work permit or license issued by the RCB.
- If issued, the work permit allows me to work only as a Respiratory Care Practitioner Applicant under the direct supervision of a California-licensed Respiratory Care Practitioner.
- I must immediately stop working if my work permit expires, is denied, or becomes invalid.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit completed requests to [rcbinfo@dca.ca.gov](mailto:rcbinfo@dca.ca.gov). A work permit is generally issued within 3 days from the time the RCB approves a work permit request. If you have questions, please contact the RCB via email at [rcbinfo@dca.ca.gov](mailto:rcbinfo@dca.ca.gov) or phone at (916) 999-2190.