

Respiratory Care Practitioner Online Renewal Step-by-Step Instructions

To renew online, go to www.breeze.ca.gov, or follow the Online License Renewal links from the Respiratory Care Board (RCB) website www.rcb.ca.gov.

If you have **never** registered for a BreEZe account, click on 'BreEZe Registration' on the bottom right of the screen.

(If you have an existing BreEZe account, enter your User ID and Password and skip to page 11 to continue.)

CA.GOV Department of Consumer Affairs BREZE

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DCA BreEZe Online Services

Welcome to the California Department of Consumer Affairs (DCA) BreEZe Online Services. BreEZe is DCA's new licensing and enforcement system and a one-stop shop for consumers, licensees and applicants! BreEZe enables consumers to verify a professional license and file a consumer complaint. Licensees and applicants can submit license applications, renew a license and change their address among other services.

- If you were registered with the DCA Online Professional Licensing services before, you will need to re-register with BreEZe.
- BreEZe only accepts credit card payments for American Express, Discover, MasterCard, and Visa.

FOR CONSUMERS

Check Licenses and file complaints.

[Verify a LICENSE](#) [File a COMPLAINT](#)

FOR APPLICANTS AND LICENSEES

Applicant and licensing needs are available here.
You will need to [register](#), or use your existing user name and password

Returning User

Fields marked with * are required

* User ID:

* Password:

[Forgot Password?](#) [Forgot User ID?](#) [Sign In](#)

New Users

[BreEZe Registration](#)

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Complete the required fields for the User Registration (marked with *) and click 'Next'.

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User Registration

Please complete the information required below to become a registered BreEZe User. You will receive a confirmation email as part of the registration process.

Enter your details and press "Next".

Press "Cancel" to cancel this registration and return to the main menu.

Account Owner Contact Information

* First Name:

Middle Name:

* Last Name:

Account Login

* Email: (e.g. name@domain.com)

* Confirm Email:
Note: Please enter a valid email address; this email address will not be sold to solicitors.

* User ID:

Password Recovery (In case you forget your password, you will be required to answer this question to obtain a new temporary password.)

* Secret Question:

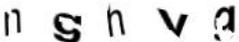
* Secret Answer:

Communication

Email Communication: Yes No

Security Measures (This helps to prevent automated registrations.)

* Type the characters from the picture below (without spaces):



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Review the information you entered, and click **'Save'**.

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Preview Registration

Press "Save" to save the registration.
Press "Edit" to modify your registration details.
Press "Cancel" to cancel this registration and return to the main menu.

First Name:	Mickey
Second Name:	
Last Name:	Mouse
Email:	mickeymouse@mailinator.com
UserId:	mickeymouse
Secret Question:	Where were you born?
Secret Answer:	ca
Email Communication:	Yes

[Save](#) [Edit](#) [Cancel](#)

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A notification will show that a temporary password has been sent to your e-mail address. Check your e-mail for this password sent from no-reply-breeze-online@dca.ca.gov. (You may need to check spam or junk mail folders.)

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User Registration - Temporary Password Issued

A temporary password has been issued and sent to you via e-mail with the instructions on how to proceed. Read this e-mail and follow the instructions.

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Open your e-mail message to view the temporary password. Print, write, or copy this temporary password, then click the <https://www.breeze.ca.gov/datamart/languageChoice.do> link to complete the registration process.

Hello Mickey,

Thank you for registering for a BreZE Online Services account. Please complete your registration by using the temporary password provided below. Please note that your online password is case sensitive.

Your temporary password is : PqMkQRK5



Complete the registration process at:

<https://www.breeze.ca.gov/datamart/languageChoice.do>



**Note: Note: This is an automated email. Do NOT reply to this message.

Enter the User ID you created during User Registration, and enter the temporary password.



Department of Consumer Affairs



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DCA BreEZe Online Services

Welcome to the California Department of Consumer Affairs (DCA) BreEZe Online Services. BreEZe is DCA's new licensing and enforcement system and a one-stop shop for consumers, licensees and applicants! BreEZe enables consumers to verify a professional license and file a consumer complaint. Licensees and applicants can submit license applications, renew a license and change their address among other services.

- If you were registered with the DCA Online Professional Licensing services before, you will need to re-register with BreEZe.
- BreEZe only accepts credit card payments for American Express, Discover, MasterCard, and Visa.

FOR CONSUMERS

Check Licenses and file complaints.

[Verify a LICENSE](#) [File a COMPLAINT](#)

FOR APPLICANTS AND LICENSEES

Applicant and licensing needs are available here.
You will need to [register](#), or use your existing user name and password

Returning User

Fields marked with * are required

* User ID:

* Password:

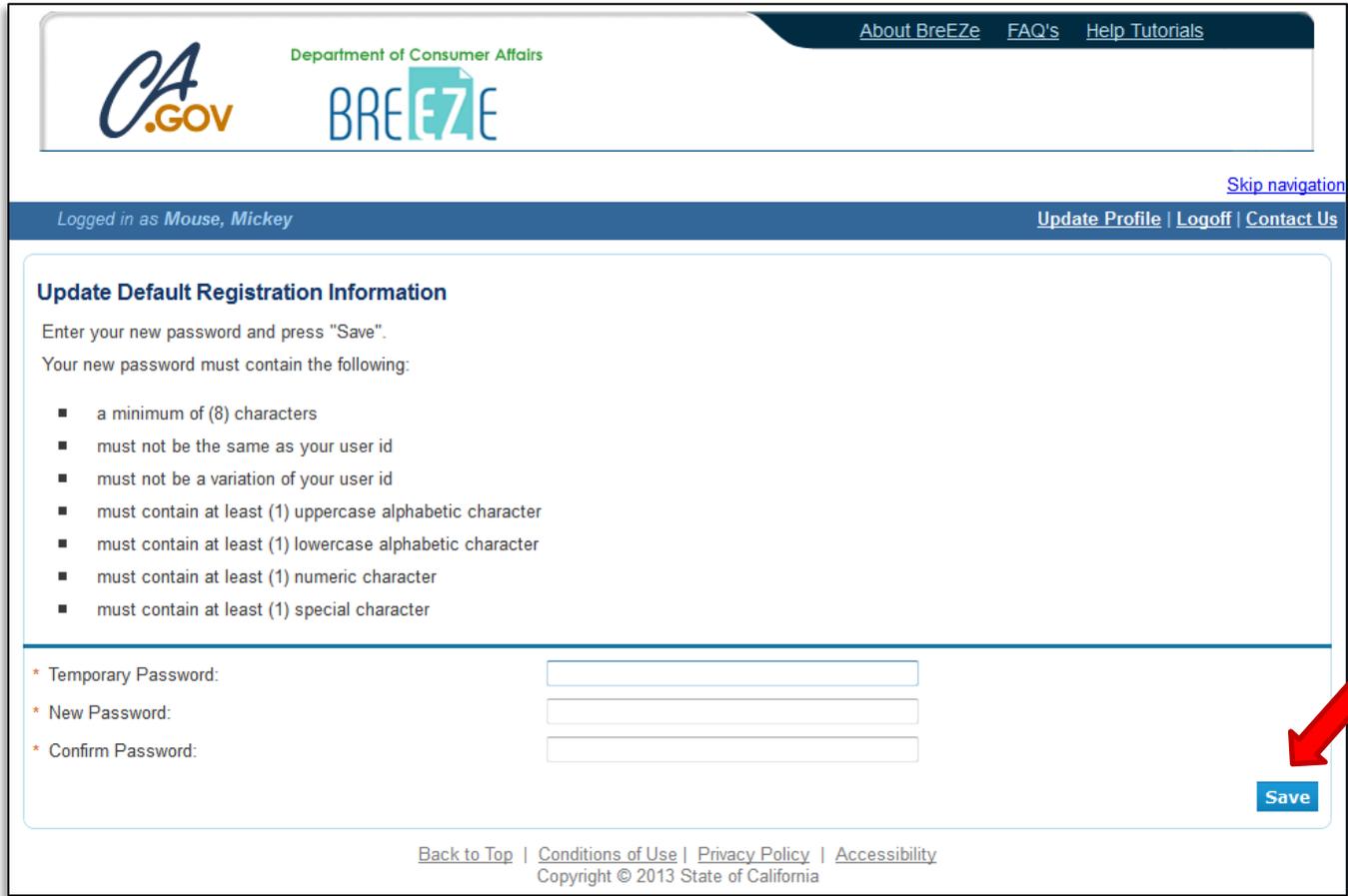
[Forgot Password?](#) [Forgot User ID?](#) [Sign In](#)

New Users

[BreEZe Registration](#)

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Enter the temporary password again, then create your new password. **Your new password must include:** a minimum of 8 characters, must not be the same as your user id, must not be a variation of your user id, must contain at least 1 uppercase alphabetic character, must contain at least 1 lowercase alphabetic character, must contain at least 1 numeric character, must contain at least 1 special character. (A special character is a symbol such as: !, @, #, %, etc.) Confirm your new password by re-entering it in the Confirm Password box, and click **'Save'**.



The screenshot shows the BreEZe user interface. At the top left is the CA.GOV logo and the Department of Consumer Affairs logo. To the right are links for 'About BreEZe', 'FAQ's', and 'Help Tutorials'. Below the header, it says 'Logged in as Mouse, Mickey' and provides links for 'Update Profile', 'Logoff', and 'Contact Us'. The main content area is titled 'Update Default Registration Information' and includes instructions: 'Enter your new password and press "Save". Your new password must contain the following:'. A bulleted list specifies requirements: a minimum of 8 characters, not the same as user id, not a variation of user id, at least one uppercase, lowercase, numeric, and special character. Below this are three input fields: 'Temporary Password', 'New Password', and 'Confirm Password'. A blue 'Save' button is located at the bottom right of the form, with a red arrow pointing to it. At the bottom of the page are links for 'Back to Top', 'Conditions of Use', 'Privacy Policy', and 'Accessibility', along with a copyright notice for 2013 State of California.

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Update Default Registration Information

Enter your new password and press "Save".
Your new password must contain the following:

- a minimum of (8) characters
- must not be the same as your user id
- must not be a variation of your user id
- must contain at least (1) uppercase alphabetic character
- must contain at least (1) lowercase alphabetic character
- must contain at least (1) numeric character
- must contain at least (1) special character

* Temporary Password:

* New Password:

* Confirm Password:

[Save](#)

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At the Add Licenses to Registration screen, click **'Yes'**, then click **'Next'** to continue.

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Step1: Ever held a license before with DCA?

Add Licenses To Registration

Welcome to DCA OnlineQuickStart

By answering a few, simple questions, we will help you to get started.

Are you, or have you ever been, professionally licensed or registered with the Department of Consumer Affairs?

Yes [How do I know?](#)

No

Next

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Select **'Respiratory Care Board'** from the 'DCA Board/Bureau/Committee' dropdown box, and **'Respiratory Care Practitioner'** from the 'License/Registration Type' dropdown box, then click **'Next'** to continue.

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Step1: Ever held a license before with DCA?

Add Licenses To Registration - Select License Type

Welcome to DCA OnlineQuickStart

Identify the License/Registration that you have held, or you have applied for, in the past.

Which board manages your License/Registration type? Selecting the appropriate board will narrow the available items found in the License/Registration drop-down list.

DCA Board/Bureau/Committee: **Respiratory Care Board** [How do I know?](#)

License/Registration Type: **Respiratory Care Practitioner** [How do I know?](#)

Next Cancel

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Enter the personal information requested to validate your license information. [If you have a suffix in your name (Jr., III, etc.) please include this in the 'Last Name' field. (Example: Mouse Jr.)] Enter the security characters*, and click 'Next'.

*(If you have troubles reading the security characters, click 'Refresh' until they become easier to read.)

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Step1: Ever held a license before with DCA?

Step2: Provide Identifying Information

Step3: Confirm Information

Add Licenses To Registration - Validation

Help us find your records.

Please note that you must have an SSN/ITIN on file with your licensing Board/Bureau/Committee in order to on-board your license. If you do not have an SSN/ITIN on file, you will not be able to onboard your license. Please contact your Board/Bureau /Committee for instruction on how to provide your SSN/ITIN.

Please provide your information in order for the Department of Consumer Affairs to confirm that you do not have a previous record in the BreEZe system. A previous record may include: licensee, complainant, witness, etc

* Required Information

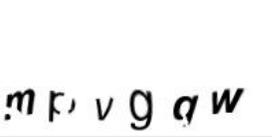
* Last Name:

* SSN/ITIN: Last 4 Digits of SSN/ITIN

* Date Of Birth: (mm/dd/yyyy)

Security Measures (This helps to prevent automated registrations.)

* Type the characters from the picture below (without spaces):

 Refresh

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Verify that this is your name and license number, then click 'I confirm this is my license/registration information', and click 'Next'.

If for some reason you are not able to link your license information to your BreEZe account, please call the RCB at (916) 999-2190, or toll free at (866) 375-0386 M-F 8am-5pm.

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Step1: Ever held a license before with DCA?

Step2: Provide Identifying Information

Step3: Confirm Information

Add Licenses To Registration - Preview

Good News! We have located your information

Please confirm your license/registration/certificate credentials below. If you are a current applicant, you will see the type of license you are currently pursuing listed below.

Indiv / Org Number:

Name: MOUSE, MICKEY

license/registration Type	license/registration Number
Respiratory Care Practitioner	

Select One:

I confirm this is my license/registration information (read www.dca.ca.gov/webapps/breeze/dec_descript.php)

No this is not my license/registration information

Next Cancel

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After successfully linking your license, you will receive the following message asking if you would like to link more licenses to your profile, click 'No' to continue.

The screenshot shows the BREZE website interface. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs logo, and the BREZE logo. Navigation links for 'About BreEZe', 'FAQ's', and 'Help Tutorials' are visible. The user is logged in as 'Mouse, Mickey'. A 'Quick Start Menu' is present, along with 'License Activities' and 'Applications' sections. A 'License/Registration Information' box shows details for a Respiratory Care Practitioner with license number 29228. A central dialog box asks: 'You have successfully linked your online registration to a license(s). Would you like to link your online registration to more license(s)?' with 'Yes' and 'No' buttons. A red arrow points to the 'No' button. The footer contains links for 'Back to Top', 'Conditions of Use', 'Privacy Policy', and 'Accessibility', along with a copyright notice for 2013 State of California.

This will bring you to the **Quick Start Menu**.

The screenshot shows the BreEze website interface. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs logo, and the BreEze logo. Navigation links for 'About BreEze', 'FAQ's', and 'Help Tutorials' are visible. A user is logged in as 'Mouse, Mickey'. The main content area is titled 'Quick Start Menu' and contains several sections: 'License Activities', 'Applications', and 'Additional Activities'. A 'License/Registration Information' sidebar is also present.

Quick Start Menu
To start, choose an option, and you will return to this Quick Start menu after you have finished.

License Activities

- It is time to Renew!
Respiratory Care Practitioner **Select**
- Manage your license information
Respiratory Care Practitioner
<Choose Application> **Select**

Applications

- Start a New Application or Take an Exam
<Choose Board>
<Choose Application> **Select**
- View Application Status
Respiratory Care Board - Respiratory Care Practitioner Renewal Application Status: Pending **Details**

Additional Activities

- Make Payments/Cart **Select**
- Add Authorized Representative **Select**
- License Notification Subscriptions **Select**

License/Registration Information **Show Details**

License/Registration Number:
License/Registration Type Respiratory Care Practitioner

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To renew your RCP license, click the **'Select'** button under **License Activities - 'It is time to Renew!'**

Please note: This renewal message will only show during the 90 days prior to your license expiration date, and up to 3 years after your expiration date if your license is delinquent. If this message is not showing within 30 days of your license expiration date, please contact the RCB.

This image is a close-up of the 'License Activities' section from the screenshot above. It highlights the 'It is time to Renew!' option, which includes a 'Respiratory Care Practitioner' label and a blue 'Select' button. A red arrow points directly to the 'Select' button.

License Activities

- It is time to Renew!
Respiratory Care Practitioner **Select**
- Manage your license information
Respiratory Care Practitioner
<Choose Application> **Select**

At the Respiratory Care Practitioner Renewal Application – Introduction screen, please read the information carefully, and click **‘Next’** to continue.

Please note: If you have a name change, STOP HERE and click ‘Cancel’ to return to your Quick Start Menu. You will need to complete the Name Change application before returning to renew your license.

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Introduction

Respiratory Care Practitioner Renewal Application - Introduction

Welcome to the Online License Renewal Process! Please ensure you are prepared to document the following requirements for your license renewal:

- CEUs
 - A minimum of 30 CEUs are required for renewal for licenses expiring July 31, 2017 or later.
 - A minimum of 15 CEUs are required for renewal for licenses expiring June 30, 2017 or earlier.
 - If this is your FIRST renewal, and your license expires July 31, 2017 or later, you need a minimum of 15 CEUs.
 - If this is your FIRST renewal, and your license expires June 30, 2017 or earlier, you need a minimum of 9 CEUs.
- Ethics
 - The Law and Professional Ethics Course is due for every other renewal period. If you do not know if you need to take the ethics course for your current renewal period, you may find this information on section 2 of your renewal form, on your Breeze account, or you may contact the Board.
- Conviction/Discipline Disclosure
 - You must disclose if, subsequent to the issuance of your license or since you last renewed, you have had any license discipline by a government agency, the USA or its territories, military court, a foreign government, or other disciplinary body, or if you have been arrested, convicted or pled guilty or nolo contendere to any crime.
- Current Address
 - Please make sure the Board has your current address on file.
- Employer Information
- If you wish to renew "Inactive," please indicate this information on the first section of the renewal application. Inactive status is ONLY for licensees who do not plan on using the California RCP license for a period of time. The ethics course and CEUs are not required for an Inactive status. However, the renewal fee is still due to keep your license current. (If you wish to change your status back to Active in the future, please submit your 15 CEUs and ethics course certificates of completion to the Board.)

If you have any questions regarding this information, the renewal application, or the renewal process, please contact the Board's office at 916-999-2190 or toll free at 866-375-0386.

Press "Next" to continue.
Press "Cancel" to exit this application.

If you need to change your current address please go back to the quick start menu by pressing 'Cancel' and select the 'Address Change' application.

Next **Cancel**

On the [Information Privacy Act](#) screen, please read the information carefully and click 'Agree' to continue.

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Respiratory Care Practitioner Renewal Application - Information Privacy Act

NOTICE ON COLLECTION OF PERSONAL INFORMATION

Collection and Use of Personal Information:
The Respiratory Care Board of the Department of Consumer Affairs collects the personal information requested on this form as authorized by Business and Professions Code Sections 30 and 3730. The Respiratory Care Board uses this information principally to identify and evaluate applicants for licensure, issue and renew licenses, and to enforce licensing standards set by law and regulation. **Mandatory Submission.** Submission of the requested information is mandatory. The Respiratory Care Board cannot consider your application for licensure or renewal unless you provide all of the requested information. **Access to Personal Information.** You may review the records maintained by the Respiratory Care Board that contain your personal information, as permitted by the Information Practices Act. See below for contact information. **Possible Disclosure of Personal Information.** We make every effort to protect the personal information you provide us. The information you provide, however, may be disclosed in the following circumstances:

- In response to a Public Records Act request (Government Code Section 6250 and following), as allowed by the Information Practices Act (Civil Code Section 1798 and following);
- To another government agency as required by state or federal law; or
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information:
For questions about this notice or access to your records, you may contact:
Respiratory Care Board
3750 Rosin Court Suite 100
Sacramento, CA 95834
Phone: (866) 375-0386
Email: rcbinfo@dca.ca.gov

For questions about the Department of Consumer Affairs's privacy policy or the Information Practices Act, you may contact:
Office of Information Security and Privacy Protection
1625 North Market Blvd.
Sacramento, CA 95834
Phone: (866) 785-9663
Email: privacy@oispp.ca.gov

Press "Agree" to continue.
Press "Cancel" to exit this application.

[Agree](#) [Cancel](#)

On the Application Questions screen, answer the military question and click **'Next'** to continue.

The screenshot shows the BREZE application interface. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs logo, and the BREZE logo. Navigation links include 'About BreEZe', 'FAQ's', and 'Help Tutorials'. A user is logged in as 'Mouse, Mickey', with links for 'Update Profile', 'Logoff', and 'Contact Us'. The main content area is titled 'Respiratory Care Practitioner Renewal Application - Application Questions'. It contains instructions: 'Answer the questions and press "Next" to continue.', 'Press "Previous" to return to the previous section.', and 'Press "Cancel" to exit this application.' The current question is 'Have you served or are you currently serving in the military?'. A dropdown menu is visible next to the question, with a red arrow pointing to it. Below the question are three buttons: 'Previous', 'Next', and 'Cancel'. A sidebar on the left lists various application sections, with 'Application Questions' currently selected. At the bottom, there are links for 'Back to Top', 'Conditions of Use', 'Privacy Policy', and 'Accessibility', along with the copyright notice 'Copyright © 2013 State of California'.

On the Name and Personal Details screen, verify your information is correct and click **'Next'**.

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Logged in as Mouse, Mickey [Skip navigation](#) [Update Profile](#) | [Logoff](#) | [Contact Us](#)

Respiratory Care Practitioner Renewal Application - Name and Personal Details

Press "Previous" to return to the previous screen.
Verify your personal details and press "Next" to continue.
Press "Cancel" to exit this application.

Title:

First Name: MICKEY

Middle Name:

Last Name: MOUSE

Birthdate: (mm/dd/yyyy)

Gender: Male

[Previous](#) [Next](#) [Cancel](#)

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On the Address Detail Summary screen, verify your information is correct and click **'Next'**.

If you need to fix/update your address, phone number, or e-mail, click the blue 'Address of Record' link under 'License Specific Addresses' to edit the information.

The screenshot displays the 'Respiratory Care Practitioner Renewal Application - Address Detail Summary' page. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs name, and the BREZE logo. Navigation links for 'About BreEze', 'FAQ's', and 'Help/Tutorials' are present. A user is logged in as 'Mouse, Mickey', with options to 'Update Profile', 'Logoff', and 'Contact Us'. The left sidebar contains a menu with items like 'Introduction', 'Information Privacy Act', 'Application Questions', 'Name and Personal/Organization Details', 'Contact Details', 'Questions', 'Yes to Conviction Question', 'Ethics', 'CE Information', 'Employment History', 'Work Location', 'Healing Art Survey', 'File Attachments', and 'Application Summary'. The main content area shows instructions: 'Press "Previous" to return to the previous section.', 'Press "Next" when finished adding/changing addresses.', and 'Press "Cancel" to exit this application.' Below this is the 'License Specific Addresses' section, which includes a table with columns for 'Name' and 'Address'. The 'Name' field contains 'MOUSE, MICKEY'. The 'Address' field is empty. Below the table are fields for 'Phone Number' and 'E-mail'. A note states: 'Please note, the 'Address of Record' will be disclosed to the public.' At the bottom right, there are three buttons: 'Previous', 'Next', and 'Cancel'. A red arrow points to the 'Address of Record' link in the table, and another red arrow points to the 'Next' button.

On the Questions – Information screen, answer the renewal questions and click ‘**Next**’ to continue.

If you are unsure if you need to take the Law and Professional Ethics course required for every other renewal period, you may go to www.breeze.ca.gov and click on ‘Verify a License’ to see if the Ethics course is required for this renewal period. You may also contact the RCB.

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Respiratory Care Practitioner Renewal Application - Questions - Information

Please Note: If you are required to complete Law and Professional Ethics as part of your current renewal period, this would be indicated on your initial renewal notice. You can also verify yourself on www.breeze.ca.gov to see if you are required to take the Law and Professional Ethics Course this renewal period. Please be aware that if you are required to take the course this renewal period and fail to complete it, your license will not be renewed until this and any other deficiencies have been corrected. If you have selected to renew 'Inactive', you are not required to enter Law and Professional Ethics Course information.

Press "Previous" to return to the previous section.

Enter appropriate details and press "Next" to continue.

Press "Cancel" to exit this application.

Would you like to renew Active? Check "Yes" for Active, or check "No" for Inactive. Yes No

Have you successfully completed the hours of continuing education as required for license renewal? Yes No

Have you successfully completed a Board-approved Law and Professional Ethics Course? You can check whether or not you are required to complete this course during your current renewal period by verifying your license at www.breeze.ca.gov Yes No

Subsequent to the issuance of your license or since you last renewed, have you had any license discipline by a government agency, the USA or its territories, military court, a foreign government, or other disciplinary body, or have you been arrested, convicted or pled guilty or nolo contendere to any crime? Do NOT list charges dismissed under section 1000.3 of the California Penal Code or equivalent non-California laws, or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b). Include all other arrests, pleas, and convictions for misdemeanors and felonies, and traffic infractions involving drugs or alcohol. Yes No

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On the Yes to Conviction Question – Information screen:

If you answered **'Yes'** to the last question on the previous screen regarding disclosure of all convictions since your last renewal, click **'Add'** to enter applicable information. Once you are done adding details, click **'Save'** then **'Next'** to continue.

If you answered **'No'** to the last question on the previous screen regarding disclosure of all convictions since your last renewal, click **'Next'** to continue.

The screenshot shows the BreEZe application interface. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs logo, and the BREZE logo. Navigation links include 'About BreEZe', 'FAQ's', and 'Help/Tutorials'. A user is logged in as 'Mouse, Mickey', with links for 'Update Profile', 'Logoff', and 'Contact Us'. The main content area is titled 'Respiratory Care Practitioner Renewal Application - Yes to Conviction Question - Information'. It contains instructions for users who answered 'Yes' or 'No' to the conviction question. Below the instructions is a table with columns for 'Date of Offense', 'Date of Conviction', 'Location of Offense', 'Dates of Imprisonment', 'Dates of Parole', 'Dates of Probation', and 'Detailed Description of Incident'. The table is currently empty. At the bottom of the table area are buttons for 'Add', 'Previous', 'Next', and 'Cancel'. The footer contains links for 'Back to Top', 'Conditions of Use', 'Privacy Policy', and 'Accessibility', along with a copyright notice for 2013 State of California.

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Respiratory Care Practitioner Renewal Application - Yes to Conviction Question - Information

If you answered "Yes" to the question regarding disclosure of all convictions since your last renewal, please fill out the applicable information below. If you answered "No", please press "Next" to continue.

Press the "Edit" link to edit the record.

Press the "Remove" link to remove the record.

Press "Add" to add a new record.

Press "Previous" to return to the previous section.

Enter appropriate details and press "Next" to continue.

Press "Cancel" to exit this application.

Date of Offense (mm/dd/yyyy)	Date of Conviction: (mm/dd/yyyy)	Location of Offense	Dates of Imprisonment:	Dates of Parole:	Dates of Probation	Detailed Description of Incident:
------------------------------	----------------------------------	---------------------	------------------------	------------------	--------------------	-----------------------------------

[Add](#) [Previous](#) [Next](#) [Cancel](#)

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On the Ethics – Information screen, select the Course Provider and enter the Course Date if the Ethics course is required for your current renewal. Then click **‘Next’** to continue.

If you are not required to take this course, you may leave these areas blank and click **‘Next’** to continue.

The screenshot shows the BREZE website interface. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs logo, and the BREZE logo. Navigation links include 'About BreEZe', 'FAQ's', and 'Help/Tutorials'. A user is logged in as 'Mouse, Mickey', with links for 'Update Profile', 'Logoff', and 'Contact Us'. The main content area is titled 'Respiratory Care Practitioner Renewal Application - Ethics - Information'. It contains instructions: 'If you are required to complete Law and Professional Ethics as part of your current renewal period, this would be indicated on your initial renewal notice. You can also verify yourself on www.breeze.ca.gov to see if you are required to take the Law and Professional Ethics Course this renewal period. Please be aware that if you are required to take the course this renewal period and fail to complete it, your license will not be renewed until this and any other deficiencies have been corrected.' Below this, it says 'Please complete the requested information below if you are required to complete Law and Professional Ethics this renewal period. Links to the online courses are available on the RCB website. If you have selected to renew 'Inactive', you may press "Next" to continue, as you are not required to enter Law and Professional Ethics Course information.' There are three buttons: 'Previous', 'Next', and 'Cancel'. The form fields are: 'Course Provider:' with a dropdown menu, and 'Course Date:' with a date input field (format mm/dd/yyyy). A left sidebar menu includes: Introduction, Information Privacy Act, Application Questions, Name and Personal/Organization Details, Contact Details, Questions, Yes to Conviction Question, Ethics (selected), CE Information, Employment History, Work Location, Healing Art Survey, File Attachments, and Application Summary. At the bottom, there are links for 'Back to Top', 'Conditions of Use', 'Privacy Policy', and 'Accessibility', along with the copyright notice 'Copyright © 2013 State of California'.

On the CE Information screen, enter the number of units completed for this renewal period, then click **'Next'** to continue.

(If you selected to renew Inactive, enter "0" in the box and click 'Next' to continue.)

The screenshot shows the BREZE application interface. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs logo, and the BREZE logo. Navigation links include "About BreZE", "FAQ's", and "Help Tutorials". A user is logged in as "Mouse, Mickey". The main content area is titled "Respiratory Care Practitioner Renewal Application - CE Information - Information". It contains instructions: "Press 'Previous' to return to the previous section.", "Enter appropriate details and press 'Next' to continue.", and "Press 'Cancel' to exit this application." Below this, there are two paragraphs of text: "If you are renewing as Inactive, you are not required to complete the CEUs for renewal. If you have not completed any CEUs, please enter 0 in the box below." and "If you are renewing as Active, be aware that you are required to complete your CEUs for each renewal period. Please enter the number completed below." A form field labeled "* CE Units Completed:" is present, followed by "Previous", "Next", and "Cancel" buttons. A sidebar on the left lists navigation options: Introduction, Information Privacy Act, Application Questions, Name and Personal/Organization Details, Contact Details, Questions, Yes to Conviction Question, Ethics, CE Information (highlighted), Employment History, Work Location, Healing Art Survey, File Attachments, and Application Summary. At the bottom, there are links for "Back to Top", "Conditions of Use", "Privacy Policy", and "Accessibility", along with the copyright notice "Copyright © 2013 State of California".

On the Employment History – Information screen, enter you employer name, city, state, and phone number, then click **'Next'** to continue.

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Respiratory Care Practitioner Renewal Application - Employment History - Information

If you are unemployed, please enter 'Unemployed' in the Employer 1 box, then enter your own city, state, and phone number.
Press "Previous" to return to the previous section.
Enter appropriate details and press "Next" to continue.
Press "Cancel" to exit this application.

* Employer 1:
* Employer City 1:
* Employer State 1:
* Employer Phone 1:
Employer 2:
Employer City 2:
Employer State 2:
Employer Phone 2:
Employer 3:
Employer City 3:
Employer State 3:
Employer Phone 3:

[Previous](#) [Next](#) [Cancel](#)

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The Work Location – Information screen contains an optional survey relating to your work in the healing arts profession. You may click **'Add'** to take the survey, and **'Next'** to continue.



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- Healing Art Survey
- File Attachments
- Application Summary

Respiratory Care Practitioner Renewal Application - Work Location - Information

Please consider completing the following optional survey questions relating to your work in the healing arts profession. Completion of the survey helps determine health professionals' shortages and improves access to patient care. If you do not wish to complete this component of the survey, select 'Next' at the bottom of the screen to proceed forward with your application.

Please select 'Add' below to add information relevant to one or more of your current work locations. You will be allowed to enter more than one work location.

Press the "Edit" link to edit the record.

Press the "Remove" link to remove the record.

Press "Add" to add a new record.

Press "Previous" to return to the previous section.

Enter appropriate details and press "Next" to continue.

Press "Cancel" to exit this application.

Years with Employer	Self Employed	County	Zip Code	Health Occupation	Work Hours	Acute Care Hospital	Home Care/Durable Medical Equipment	Long-Term Acute Care	Skilled Nursing Facility	Accredited Education Program	Ma
< [] >											

Add
Previous
Next
Cancel

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The Healing Art Survey – Information screen contains another optional survey relating to your healing arts profession. You may enter the appropriate details and click **‘Next’**.



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- Healing Art Survey**
- File Attachments
- Application Summary

Respiratory Care Practitioner Renewal Application - Healing Art Survey - Information

Please consider completing the following optional survey questions relating to your healing arts profession. Completion of the survey helps determine health professionals' shortages and improves access to patient care. If you do not wish to complete this component of the survey, select 'Next' at the bottom of the screen to proceed forward with your application.

Press "Previous" to return to the previous section.
Enter appropriate details and press "Next" to continue.
Press "Cancel" to exit this application.

Additional Credentials/Certificates:

Are you presently pursuing credentials or certifications in addition to your previously obtained qualifying degree? Yes No

If you answered 'Yes' to the previous question, please enter the name of the credential/certification:

If you are pursuing additional credentials or certifications, what is the expected year of completion (e.g. 2018)?

If applicable, please enter the name of the school at which you are pursuing your additional credential/certification:

If applicable, please enter the address of the school at which you are pursuing your additional credential/certification:

Cultural/Ethnic Background:

If you identify your cultural/ethnic background as African American, please select 'Yes.' Yes No

If you identify your cultural/ethnic background as American Indian/Native American/Alaskan Native, please select 'Yes.' Yes No

If you identify your cultural/ethnic background as Caucasian/White European/Middle Eastern, please select 'Yes.' Yes No

If you identify your cultural/ethnic background as Latino/Hispanic, please select 'Yes.' Yes No

The Attachments screen is an optional screen where you are able to attach any documents related to this application. (CEU certificates, Ethics certificate, etc.) Click the 'Browse' button to select the file from your computer, then click 'Attach' to include the attached documents to your application. Click '**Next**' to continue.

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Respiratory Care Practitioner Renewal Application - Attachments

Locate a file with the "Browse" button and press "Attach" or "Remove" as required.
Press "Next" when there are no more files to attach.
Press "Previous" to return to the previous screen.
Press "Cancel" to exit this application.

File Name: No file selected.

Notes:

Note: The character limit for the notes field is 200 characters

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The next screen contains the Application Summary. Review the information that was entered on this application.

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- Employment History
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- File Attachments
- Application Summary

Respiratory Care Practitioner Renewal Application - Application Summary

NOTICE:

Recent legislation has passed requiring the Board to collect certain demographic data relating to our licensees at the time of licensure and renewal and report this data to the Office of Statewide Health Planning and Development. Completion of this survey will help the State analyze and report gaps in the health care workforce in California to the California Legislature.

You are required to complete a short survey to comply with this legislation when you receive your initial license and at renewal. The survey is available for you at https://www.dca.ca.gov/webapps/oshpd_survey.php. Please go to this web address and complete the survey at this time. Instructions will be provided in the survey.

Once you have completed this survey, please submit the application.

Press "Previous" to return to the previous section.

Review the data and press "Proceed to Payment" to submit this application.

Press "Cancel" to exit this application.

Respiratory Care Practitioner Renewal Application Summary

License Type:	Respiratory Care Practitioner	
File Number:		
License Number:		
Application Number:		
Application Date:		(mm/dd/yyyy)

Application Questions

Have you served or are you currently serving in the military?	No
---	-----------

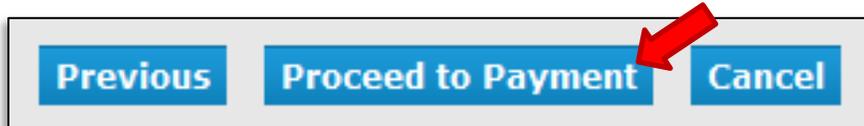
Personal Details

Title:		
First Name:	MICKEY	
Middle Name:		
Last Name:	MOUSE	
Birthdate:		
Gender:	Male	

Addresses

License Specific Addresses

Once you review the information entered, click **'Proceed to Payment'** at the bottom of the screen.



On the Attestation screen, read the statement, click **'Yes'**, then click **'Proceed to Payment'** to continue.

The screenshot shows the BreEze website interface. At the top left is the CA.GOV logo and the Department of Consumer Affairs logo. The top right navigation bar includes links for 'About BreEze', 'FAQ's', and 'Help/Tutorials'. A user is logged in as 'Mouse, Mickey', with links for 'Update Profile', 'Logoff', and 'Contact Us'. The main content area is titled 'Respiratory Care Practitioner Renewal Application - Attestation'. It contains instructions: 'Press "Previous" to return to the previous section.', 'Answer "Yes" or "No" to the Attestation and press "Proceed to Payment" to continue.', and 'Press "Cancel" to exit this application.' Below this is a sworn statement: 'I swear under penalty of perjury under the laws of the State of California that all statements, answers, and representations on this form, including supplementary information attached hereto, are true, complete and accurate. By selecting "Yes" and clicking "Proceed to Payment" I attest that I have read and understand this statement.' There are radio buttons for 'Yes' and 'No', with 'Yes' selected. At the bottom right of the main content area are three buttons: 'Previous', 'Proceed to Payment', and 'Cancel'. A left-hand navigation menu lists various sections: Introduction, Information Privacy Act, Application Questions, Name and Personal/Organization Details, Contact Details, Questions, Yes to Conviction Question, Ethics, CE Information, Employment History, Work Location, Healing Art Survey, File Attachments, and Application Summary (which is highlighted). At the bottom of the page are links for 'Back to Top', 'Conditions of Use', 'Privacy Policy', and 'Accessibility', along with the copyright notice 'Copyright © 2013 State of California'.

You will then be taken to the Fee and Summary Report. Click **'Pay Now'** to pay with a debit or credit card.



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Logged in as: *Mouse, Mickey*

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Fee and Summary Report

Your application data has been submitted. Click on "View PDF Summary Report" and print this report for your records.
You are required to pay the amount below for your application to be processed.
Press "Pay Now" to proceed to the fee payment page.
Press "Add to Cart" to Add to Shopping Cart and return to the main menu.

Fees

Renewal Fee:	\$250.00
Total Amount Due:	\$250.00

[Pay Now](#)

[Add to Cart](#)

[View PDF Summary Report](#)



Select your Payment Method and click **'Next'**.

Application Number	Description	License Number	License Type	Applicant Name	Fee
14050345	Respiratory Care Practitioner Renewal Application	29228	Respiratory Care Practitioner	MOUSE, MICKEY	\$250.00 <input checked="" type="checkbox"/>

Payment Method

- Visa
- MasterCard
- Discover
- American Express

[Next](#) [Show Fee Details](#) [Cancel](#)

Review the fee and Payment Method, and click **'Next'**.

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Confirm Payment Details

PLEASE NOTE: When entering your credit card number on the following screen, please DO NOT include spaces, dashes, or hypens. This action will cause an error, and you will then need to log back into the Online Application Payment portion of the application process.

Please review the information below and make sure everything is correct. Then, press "Next" to pay for the selected application(s).
Press "Cancel" if you do not wish to continue with the payment.

Application Number	Description	Applicant Name	Fee
14050345	Respiratory Care Practitioner Renewal Application	MOUSE, MICKEY	\$250.00
Total			\$250.00

Payment Method: Visa

Next Cancel

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After clicking **'Next'** from the Confirm Payment Details screen, you will be taken to a screen to enter your debit or credit card information.

(Please note: The 'CVV2' is the 3 digit code on the back of your payment card, and the card expiration date needs to be entered in the 'MMYY' format.)

After you click 'Process', you will be taken to a Successful Payment screen where you will have the option to print a PDF receipt for your records. You may check to ensure your license has been renewed by checking the 'License/Registration Information' from the Quick Start Menu, or by clicking 'Verify a License' from www.breeze.ca.gov.

If you do not see a new expiration date associated with your license, there may be a hold on your renewal. Please call the RCB at (916) 999-2190, or toll free at (866) 375-0386 for more information.