



State of Idaho
 Division Of Occupational and Professional Licenses

BRAD LITTLE
 Governor
RUSSELL BARRON
 Administrator

11341 W Chinden Blvd.
 P.O. Box 83720
 Boise, ID 83720-0063
 (208) 334-3233
 dopl.idaho.gov

Date Rec'd _____
Disposal Date _____

**Notice of Termination
 For Reasons of Adulteration or Misappropriation of Controlled Substances**

Reporting Employer:		
Address		
Phone/Fax		
Contact Person		
Name of Terminated Employee:		
Address		
SS# or DOB		
Type of License		Idaho License No:
Date of Termination		
Reason for Termination		
Description of Controlled Substance adulteration or misappropriation of controlled substances involved in the termination. Include: name of drug, date and time of occurrence, etc.		

In order to file a disciplinary complaint, contact the appropriate licensing board. The filing of this notice does not constitute the filing of a disciplinary complaint.

This Notice of Termination is filed and subject to disclosure pursuant to Section 37-117A, Idaho Code, and will be maintained for fifteen (15) years from the date of receipt by the professional licensing board.

If further information reveals this report was made in error, the reporting entity is responsible for submitting a retraction to the appropriate Board.

Complete the above information and return to the appropriate board:

Health Professions Bureau - HP-Licensing@dopl.idaho.gov

Board of Dentistry

Board of Medicine

Board of Nursing

Board of Optometry

Board of Pharmacy

Board of Podiatry

Occupational Licenses Bureau -

Nursing Home Administrators nha@dopl.idaho.gov

Residential Care Facility Administrators rca@dopl.idaho.gov