



STATE OF TENNESSEE
 DEPARTMENT OF HEALTH
 DIVISION OF HEALTH LICENSURE AND REGULATION
 OFFICE OF HEALTH RELATED BOARDS
 665 MAINSTREAM DRIVE
 NASHVILLE, TN 37243

TENNESSEE BOARD OF DIETITIAN/NUTRITIONIST EXAMINERS
 1-800-778-4123 (Toll Free) or (615) 741-3807
www.tn.gov/health

Application for Duplicate License

(Check one)	Duplicate License Type	Fee Amount
<input type="checkbox"/>	Renewal Certificate w/Wallet Card (5x7)	\$25.00
<input type="checkbox"/>	Wall License w/Gold Seal	\$25.00

I, _____,
 (First) (Middle) (Last) (Maiden)

of _____,
 (Street Address) (City) (State) (Zip)

the lawful possessor of the certificate to practice as a Dietitian/Nutritionist in the State of Tennessee, do hereby request a replacement of said license.

The license was: Lost Stolen Destroyed Other: _____

I attended: _____ and graduated in: _____.

My license number is: _____ which was issued on: _____
 (Year)

 (Signature)

 (Date)