

UNLICENSED RADIOLOGIC TECHNOLOGIST DATA FORM

On your renewal application in Kansas, you indicated that you employ/supervise person(s) who perform radiologic procedures who are not licensed as radiologic technologists. Please provide the Board with the following information:

1. Supervising Physician's Name:
2. Supervising Physician's License Number:
3. Name of Supervised Individual:
4. Supervised Individual's Employment Location(s):
5. Supervised Individual's Job Duties:
6. Supervised Individual's Radiologic Training (include dates):
7. Supervised Individual's Continuing Education (include dates):

Please provide this information within 30 days of any change. Mail completed form to:

Kansas Board of Healing Arts
Attn: Jennifer McArthur
800 SW Jackson, Lower Level – Suite A
Topeka, KS 66612