



Arizona Board of Behavioral Health Examiners
3443 N. Central Ave, Suite 1700, Phoenix, AZ 85012

FEEDBACK FORM

Board Fax: (602) 364-0890

Email Address: information@azbbhe.us

Please complete the following to provide feedback to the Arizona Board of Behavioral Health Examiners. Forms may be mailed, faxed or emailed to the contact information below.

My feedback is in reference to:

- | | | |
|---|---|---|
| <input type="checkbox"/> Licensure | <input type="checkbox"/> Renewal | <input type="checkbox"/> Investigations |
| <input type="checkbox"/> Board staff/meetings | <input type="checkbox"/> Board rules/statutes | <input type="checkbox"/> Other |

Details: _____

Do you wish to be contacted by Board staff? Yes No

CONTACT INFORMATION: (*optional unless you wish to be contacted*)

Name: _____
Address: _____
City, State, Zip: _____
Preferred phone: _____
Preferred email: _____

Thank you for taking time to provide feedback to the Board. Please submit completed form by:

- Email to: information@azbbhe.us
- Fax to: (602) 364-0890
- Mail/deliver to: Arizona Board of Behavioral Health Examiners
3443 N. Central Ave., Suite 1700
Phoenix, AZ 85012