



STATE OF ARIZONA
 BOARD OF BEHAVIORAL HEALTH EXAMINERS
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DOUGLAS A. DUCEY
 Governor

TOBI ZAVALA
 Executive Director

ACCESS TO INFORMATION

A.R.S. § 32-3206 requires the Arizona Board of Behavioral Health Examiners (“Board”) to notify the behavioral health professional who is the subject of an investigation, of their ability to request a copy of their investigative report.

IMPORTANT NOTICE

A behavioral health professional who obtains this information from the Board may not release it to any other person or entity (except the behavioral health professional’s attorney) or use it in any proceeding or action, except in connection with the Board’s review of the investigation, the disciplinary interview and any administrative proceedings or appeals related to the disciplinary interview or hearing.

A person who violates this provision of law commits an act of unprofessional conduct and may be disciplined by the Board. A.R.S. § 32-3206(C)

I, _____, request that the Board provide a copy of the following investigative report:

Licensee/Applicant Name: _____

Complaint number (if applicable): _____

Attorney Name (if applicable): _____

Board meeting date: _____

Requestor Email: _____

Requestor Phone: _____

Please provide the report via email to *(documents will only be released to the Licensee/Applicant or their Attorney)*:

Me Email: _____

My Attorney Email: _____

Both parties (complete both email addresses)

The cost for electronic documents is \$25. If you would prefer to pay with a check or money order, please complete this form and mail or hand deliver to the Board’s office with your payment.

By signing and submitting this form, I authorize the Board to release confidential investigative documents as directed above.

Signature: _____ Date: _____

| PAYMENT INFORMATION – INTERNAL USE ONLY | |
|---|---------------------|
| Authorization | Payment date |