



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE

TELEPHONE: (302) 744-4500
FAX: (302) 739-2711
WEBSITE: DPR.DELAWARE.GOV
EMAIL: customerservice.dpr@state.de.us

WRITTEN LICENSE VERIFICATION REQUEST FORM

1. REQUESTER INFORMATION

First Name: _____ Street: _____
Last Name: _____ P.O. Box: _____
Organization Name: _____ City: _____
Phone: _____ State: _____ Zip: _____
Email – *required to receive confirmation when verification is released*: _____

2. LICENSEE INFORMATION

If licensee is a person:

First Name: _____
Last/Family Name: _____
Social Security Number: _____
Profession: _____
Delaware License Number: _____

If licensee is a business or organization:

Name: _____
Location: _____
City: _____
State: _____ Zip: _____
Delaware License Number: _____

3. ADDRESS WHERE WRITTEN VERIFICATION IS TO BE MAILED

Name: _____
Street: _____ P.O. Box: _____
City: _____ State: _____ Zip: _____

4. TYPE OF VERIFICATION (*Check one*)

- Standard Verification** (*Includes license status, expiration date and disciplinary indicator*) - **\$35.00**
- *If you wish to verify a Delaware Physician M.D., Physician D.O., ACGME Training or Physician-Limited license, do **not** submit this form unless the verification is for the Veterans Administration. You must submit your request to [VeriDoc](#).*
 - *If you wish to verify a Delaware RN or LPN license, do **not** submit this form unless the verification is for a visa screen or for the Veterans Administration. Either print out an [online verification](#) or go to www.nursys.com.*
- Accountancy CPA Exam Scores - \$45.00**
CPA Exam Score verification is available only to persons who hold Delaware Accountancy Permits or Certificates. All others must order a [Candidate Score Transfer](#) from the National Association of State Boards of Accountancy (NASBA).
- Architect Exam Scores - \$45.00**
- Cosmetology/Barbering Exam Scores or School Hours - \$45.00**
- Pharmacy Internship Hours - \$45.00**
- Real Estate Licensure History - \$45.00**
- Verification of Supervised Hours - \$45.00**

Mail your request to the address above. Faxed or emailed requests will not be processed.

VERIFICATION REQUESTS RECEIVED WITHOUT THE CORRECT PAYMENT WILL BE REJECTED.