



# ***NORTH CAROLINA BOARD of OCCUPATIONAL THERAPY***

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## **DIRECTORY REQUEST**

*Please mail a current Directory of Occupational Therapists and  
Occupational Therapy Assistants to:*

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NAME LICENSE NUMBER

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MAILING ADDRESS

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CITY

STATE

ZIP CODE

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HOME PHONE

CELL PHONE

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E-MAIL ADDRESS (optional)

**Mailing Address:**     **NCBOT**  
P.O. Box 2280  
Raleigh, NC 27602

The Directory contains names and addresses of therapists with current licenses as of June 30 of the calendar year. Email addresses or phone numbers are not included.

If you are not licensed by the Board there is a \$15 charge for the directory. Payments must be made by certified check or money order.