

04/21/2009

INDIANA PROFESSIONAL LICENSING AGENCY
Internet Renewal Questions

Name: Glover, Kathleen

LICENSE#: 01042939A

Care Of:

Address:

City/St/Zip: Yellow Springs, OH 45387

Birth Date:

Date/Time

Completed: 5/6/2009 10:53:53AM

- 1.) Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending? N

- 2.) Since you last renewed, have you been denied a license, certificate, registration, or permit in any state? N

- 3.) Since you last renewed, have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? N

- 4.) Since you last renewed, have you had a malpractice judgment against you or settled any malpractice action? N

- 5.) Since you last renewed, have you been denied staff membership or privileges in any hospital or health care facility or have staff membership or privileges been revoked, suspended, or subject to any restriction, probation, or other type of discipline? N

- 6.) This question no longer applies - Answer "NO" (requires an answer to continue) N

04/15/2011

INDIANA PROFESSIONAL LICENSING AGENCY
Internet Renewal Questions

Name: Glover, Kathleen

LICENSE#: 01042939A

Care Of:

Address:

City/St/Zip: Yellow Springs, OH 45387

Birth Date:

Date/Time:

Completed:

6/22/2011 7:50:19AM

- 1.) Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state? N

- 2.) Since you last renewed, have you been denied a license, certificate, registration, or permit in any state? N

- 3.) Since you last renewed, have you been convicted of or pled guilty to a violation of a federal or state law or are criminal charges pending? N

- 4.) Since you last renewed, have you had a malpractice judgment against you or settled any malpractice action? N

- 5.) Since you last renewed, have you been denied staff membership or privileges in any hospital or health care facility or have staff membership or privileges been revoked, suspended, or subject to any restriction, probation, or other type of discipline - or have you resigned in lieu of discipline or termination? N

- 6.) Since you last renewed, have you been excluded from being a Medicare or Medicaid provider? N

- 7.) Since you last renewed, have you surrendered your DEA registration at any time or had any limitations or discipline placed on your DEA registration? N

Person Info**Name:**Kathleen Glover**Address Info****Street
Address:****Email:****Phone:****Fax:****City:**Yellow Springs**State:**OH**Zipcode:**45387**Country:**United States**County:**Greene**Survey Response Summary**

Question	Answer
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Question Response Summary

Question	Answer
1.) Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state?	N
2.) Since you last renewed, have you been denied a license, certificate, registration, or permit in any state?	N
3.) Since you last renewed, have you ever been arrested or convicted for a crime that has not been expunged by an Indiana court?	N
4.) Since you last renewed, have you had a malpractice judgment against you or settled any malpractice action?	N
5.) Since you last renewed, have you been denied staff membership or privileges in any hospital or health care facility or have staff membership or privileges been revoked, suspended, or subject to any restriction, probation, or other type of discipline - or have you resigned in lieu of discipline or termination?	N
6.) Since you last renewed, have you been excluded from being a Medicare or Medicaid provider?	N
7.) Since you last renewed, have you surrendered your DEA registration at any time or had any limitations or discipline placed on your DEA registration?	N