

# Wisconsin Department of Safety and Professional Services

Office Location: 4822 Madison Yards Way  
Madison, WI 53705  
Phone Number: (608) 266-2112

License Portal: <https://license.wi.gov/>  
Email: [dsps@wisconsin.gov](mailto:dsps@wisconsin.gov)  
Website: <http://dsps.wi.gov>

## CHIROPRACTIC EXAMINING BOARD

### CREDENTIALING INFORMATION FOR CHIROPRACTIC APPLICANTS

#### **REQUIREMENTS:**

- **License application** : Complete chiropractic application and pay appropriate fee(s) online. (Initial application fee is \$60.00.) Each applicant is required to pass a State Jurisprudence and Practical exam prescribed by the Chiropractic Examining Board per Wis. Admin. Code ch. Chir 2. (The exam fee is \$75.00.)

#### **ADDITIONAL SUPPORTING DOCUMENTS:**

- Certified transcript(s) of Bachelor's degree from an accredited college or university, indicating date of graduation and degree granted; sent from the school directly to the Board at the address above.
- Certified transcript from a Board-approved chiropractic college indicating date of graduation and degree granted; sent from the school directly to the Board at the address above.
- Certified transcript of scores of the National Board of Chiropractic Examiners (**Parts I, II, III and IV**) examination. Exam Applicants must have passed all subjects, with a score of 375 or above on Parts I and II, 438 or above on Part III, and 475 or above on Part IV to be eligible for licensure (Physiotherapy not required). For applications submitted on or after 4/18/2018, applicants must have passed all subjects with a score of 375 or above on Parts I, II, III and IV (Physiotherapy not required) to be eligible for licensure.
- If you are or were licensed in any other state or territory outside of the U.S., you are required to have each State Board or territory submit a letter of verification to the Wisconsin Department of Safety and Professional Services. The verification letter(s) must state your date of birth, credential number, date of issuance, and a statement regarding disciplinary actions. The licensing authority must then submit it **directly** to this office.
- Current copy of the CPR/AED Certificate. See DHS website at <http://dhs.wisconsin.gov> for a listing of approved programs.

#### **ENDORSEMENT REQUIREMENTS:**

Applicants must have been engaged in clinical chiropractic case management at least 24 hours per week in one or more jurisdictions in which the applicant has a current license for at least 3 of the 5 years immediately preceding application in Wisconsin. Applicants must pass the National Board of Chiropractic Examiners with a score of 375 or above on Parts I, II, III and IV to be eligible for Wisconsin licensure. Endorsement candidates who have not taken Part IV may submit the state practical exam from their endorsement jurisdiction, or SPEC exam per Wis. Admin. Code ch. Chir 3.

#### **STATE WRITTEN JURISPRUDENCE EXAMINATION:**

Objective questions to test your knowledge of the Wisconsin Statutes and Administrative Code related to chiropractic. This is an online open book examination. Instructions will be posted to your online checklist once your application has been received and processed by the Department.

A score of 75 must be obtained.

An applicant who fails the state jurisprudence examination shall be required to retake that examination and submit an exam retake fee of \$75.00.

#### **ADDITIONAL INFORMATION:**

The Board has no reciprocal agreements with any other state board or territories outside of the U.S.

The Board does not issue permits to practice chiropractic while the application for licensure is pending.

Applicants may **not** begin practice until the license has been issued.

#### **APPLICATION IS NOT COMPLETE UNTIL ALL OF THE FOLLOWING DOCUMENTS HAVE BEEN RECEIVED:**

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| <input type="checkbox"/> Complete application and pay applicable fee(s) via LisencE.   | <input type="checkbox"/> Letters from all State Boards where licensed, active and inactive  |
| <input type="checkbox"/> Certified transcript(s) of pre-professional college education   | <input type="checkbox"/> Convictions and Pending Charges ( <b>Form #2252</b> ), if applicable   |
| <input type="checkbox"/> Certified transcript from a Board-approved chiropractic college   | <input type="checkbox"/> Malpractice Suits or Claims ( <b>Form #2829</b> ) and copies of malpractice suit, court documents with allegations and settlement, if applicable |
| <input type="checkbox"/> Certified transcript of scores of the National Board of Chiropractic Examiners ( <b>Parts I, II, III and IV</b> ) examination | <input type="checkbox"/> Is name on all credentials the same? If not, submit certified copy of marriage certificate, divorce decree, etc.                                 |
| <input type="checkbox"/> Current copy of the CPR/AED Certificate   |   |
| <input type="checkbox"/> Employer Verification ( <b>Form #3218</b> ) ( <b>Endorsement only</b> )   |   |

#502 (Rev. 4/2022)

Wis. Stat. ch. 446