



STATE OF GEORGIA  
OFFICE OF THE GOVERNOR  
ATLANTA 30334-0900

Nathan Deal  
GOVERNOR

Georgia Professional Regulation Reform Act  
Action Form—Appellant

Licensing Board Name:

Appellant Name:

Preferred Email Contact:

Preferred Phone Contact:

Challenge of Proposed Rule(s):      Existing Rule(s):      Other Action:      (Check One)

Rule Number(s):

Concise Statement of Relevant Facts and Circumstances (May be attached if over 200 words in length):

**All submissions regarding Board Rules should also include by attachment the Notice of the proposed Rule, the proposed Rule, Rule Synopsis, any “concise statement of the principal reasons for and against [the Rule’s adoption]” produced by the Board pursuant to O.C.G.A. § 50-13-4(a)(2), and copies of any written or oral “data, vies, or arguments” presented to the Board.**

**All submissions regarding other Actions should include written record of the Action and any other relevant material.**

**Important!** Please redact or otherwise avoid submitting sensitive information such as social security numbers.