

MINNESOTA BOARD OF CHIROPRACTIC EXAMINERS

REQUEST FOR ADMINISTRATIVE RULE VARIANCE

This form is submitted for the purposes of requesting a variance from administrative rules pertaining to Minnesota Licensed Chiropractors. The form must be filled in completely for a review to take place. Any form which is incomplete, may be denied. Enter not applicable or n/a when appropriate. Please be concise.

1. I herewith request a variance from administrative rule number(s) 2500. _____

2. My reason for this request is: (Add additional page if necessary) (Attach any supporting documents)

3. I will take the following alternative measures if my rule variance is granted:

4. The length of time for which a variance is requested (less than 1 year): _____

5. Any other relevant information necessary to properly evaluate the request: (add additional page if necessary)

Full Name

License #

FULL Address (street/city/state/zip)

Signature of Requestor

Date

~~~~~ **FOR BOARD USE ONLY** ~~~~~

Per Executive Committee meeting on date: \_\_\_\_\_

| Variance Approved, explain: | Variance Denied, explain: |
|-----------------------------|---------------------------|
|                             |                           |

\_\_\_\_\_  
Signature of Executive Director

\_\_\_\_\_  
Date

## 2500.5050 VARIANCE

Subpart 1. **Right to request a variance.** A person subject to the rules of the board may request that the board grant a variance from any rule of the board.

Subpart 2. **Submission and contents of request.** A request for a variance must be submitted to the board in writing. Each request must be on a form prepared by the board, and must contain the following information:

- A. The specific rule for which the variance is requested
- B. The reason for the request
- C. The alternative measures that will be taken if a variance is granted
- D. The length of time for which a variance is requested, and
- E. any other relevant information necessary to properly evaluate the request for the variance.

Subpart 3. **Decision on variance.** The board shall grant a variance if it determines that:

- A. The variance will not adversely affect directly or indirectly, the health, safety, or well-being of the public;
- B. the alternative measures to be taken, if any, are equivalent to, or more protective of the public than those prescribed in the rule from which the variance is requested; and
- C. compliance with the rule from which the variance is requested would impose an undue burden upon the applicant.

The board shall deny, revoke, or refuse to grant or renew a variance if the board determines that either item a, b, or c has not been met. Any decision made relative to this provision shall be final.

Subpart 4. **Notification** The board shall notify the applicant in writing within 30 days of the board's decision. If a variance is granted, the notification shall specify the period for which the variance will be effective and the alternative measures or conditions, if any, to be met by the applicant. All such requests, as well as the board's response to the requests shall be public information.

Subpart 5. **Withdrawal** The board shall have the right to withdraw the variance if the conditions for which the variance is granted become no longer applicable. The board shall mail a notification of withdrawal no less than 14 calendar days prior to the effective date of the withdrawal.

QUESTIONS: call 651-201-2847 or [chiropractic.board@state.mn.us](mailto:chiropractic.board@state.mn.us)

**EMAIL completed Rule Variance Request To [chiropractic.board@state.mn.us](mailto:chiropractic.board@state.mn.us)**

**Or mail to:**

**MINNESOTA BOARD OF CHIROPRACTIC EXAMINERS**  
335 Randolph Avenue, Suite 280, Saint Paul, MN 55102