



Kansas *Board of
Examiners in Optometry*

Surgery Observation For OE Tracker Submission

KS ID: KS-SO-GO

Course Title: Ophthalmic Surgery Observation

Course Category: General

Course Instructor (MD): _____

Number of Hours: _____

Course Provider (Practice Name): _____

Event City: _____

Event State: _____

Date: _____

Optometrist: _____

KS License Number: _____

OE Tracker Number: _____

Please attach a signed letter from the MD to this form.

Submit directly to ARBO to enter into the OETracker: arbo@arbo.org or Fax 704-970-2720

Or submit directly to the KSSBEO during renewals only: kssbeo@ks.gov or fax 785-856-2323