

SEE BACK FOR ADDITIONAL INFORMATION

EXPIRATION DATE: 04/30/2023 LICENSE NO.: P 0000001439 RENEWAL NO.: 424975



THIS IS TO CERTIFY THAT:
DALE S FOSTER PHD
IS A DULY LICENSED
PSYCHOLOGIST
IN THE STATE OF TENNESSEE AS REQUIRED BY THE
TENNESSEE CODE ANNOTATED.

Risa Thercey
COMMISSIONER OF HEALTH

W. Parks
SIGNATURE

FOSTER, DALE S
758 WALNUT KNOLL LN
STE 101
CORDOVA TN 38018

Renewal No.
424975

State of Tennessee
Department of Health

12547126
License No.
P 0000001439

Division of Health Related Boards

This Certifies that

DALE S FOSTER PHD

whose credentials have been approved by the:

BOARD OF EXAMINERS IN PSYCHOLOGY
has fulfilled all requirements for renewal and registration as
required by the Tennessee Code Annotated and is a duly
authorized: PSYCHOLOGIST

in the State of Tennessee through APRIL 30, 2023

HEALTH SERVICE PROVIDER



ASSISTANT COMMISSIONER, HEALTH LICENSURE & REGULATION

B+C
Risa Thercey
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