

APPLICATION FOR A FULL LICENSE NOT USING FCVS—CHECKLIST

The following checklist is designed to assist applicants in submitting the necessary materials needed during the application process. Delays often occur when applicants fail to provide required information to the Board. The Board's Licensing Department encourages use of provided checklists for all license types.

Status	Item	Notes
<input type="checkbox"/>	Online application	Complete the chronological information in month / year format beginning with high school and answer all questions. Documentation can be uploaded to your application via the gateway for any affirmative responses provided.
<input type="checkbox"/>	Applicants Oath	Document will need to be signed and notarized. The original must be sent to the NCMB. Faxes and emailed copies will not be accepted.
<input type="checkbox"/>	Legal Resident Status	<p>U.S. citizens must submit a photocopy of one of the following:</p> <ol style="list-style-type: none"> 1) birth certificate 2) valid, unexpired U.S. passport <p>Not a U.S. citizen? Provide a photocopy of one of the following:</p> <ol style="list-style-type: none"> 1) Alien Registration Card or Green Card (form I-555) 2) Employment Authorization Document (form I-688 B or I-766) 3) Certification of Report of Birth (form DS-1350) 4) Arrival/Departure Record (form I-94) 5) Other documentation providing lawful U.S. status <p>Documentation can be uploaded to your application via the gateway.</p>
<input type="checkbox"/>	Name change documentation (if applicable)	A photocopy of documentation of a legal name change (marriage certificate, divorce decree, etc). Documentation can be uploaded to your application via the gateway.
<input type="checkbox"/>	Verification of Medical Education	Form should be sent to your medical school for completion. Your medical school should email the form to license@ncmedboard.org .
<input type="checkbox"/>	Postgraduate training verification	Send PGT form to every institution where you have participated in training. Institutions should email the form to license@ncmedboard.org .
<input type="checkbox"/>	Medical School Transcripts	Transcripts are required if you attended more than one medical school or more or less than the standard four years.
<input type="checkbox"/>	Evidence of passing ECFMG exam and completing a 5th pathway program (if applicable)	<p>Foreign medical school graduates must have a current ECFMG. Contact ECFMG to have a "Certification Status Report" sent to the NCMB.</p> <p>If you completed a 5th pathway program and a licensing exam other than USMLE, contact ECFMG to have an "ECFMG Examination Score Transcript" sent to the NCMB. Obtain a "Fifth Pathway Verification Form" from the NCMB. Email license@ncmedboard.org request this form.</p>

<input type="checkbox"/>	Licensing Examination Transcript	<p>Your original licensing examination scores must be sent directly from the original source ie; NBME, Flex, USMLE, NBOME, COMLEX to the NC Medical Board. This is required of every applicant even if you are speciality board certified.</p>
<input type="checkbox"/>	Physician References	<p>Two recommendation forms must be completed by physicians. Recommendation cannot be from a relative. These forms can be emailed to license@ncmedboard.org from the author.</p>
<input type="checkbox"/>	Ten-year rule	<p>You must submit documentation of 60 hours of Category 1 practice relevant CME obtained in the past three (3) years unless you have complete one of the following:</p> <ol style="list-style-type: none"> 1. You have passed one of the following examinations in the past 10 years <ul style="list-style-type: none"> • USMLE examination. • MCCQE examination. • National Osteopathic Board of Medical Examiners Examination or COMLEX. • SPEX examination with a score of at least 75. • COMVEX examination, the Osteopathic examination equivalent to SPEX. • Certification or recertification of CAQ by a specialty board recognized by the American Board of Medical Specialties (ABMS), American Osteopathic Association (AOA), Certificat of the College of Family Physicians of Canada (CCFP), Fellowship of the Royal College of Physicians of Canada (FRCP) and Fellowship of the Royal College of Surgeons of Canada (FRCS). 2. You have participated in a graduate medical education program approved by ACGME, AOA, CFPC or RCPS in the last 10 years.
<input type="checkbox"/>	Fingerprint cards, authority to release form and criminal history	<p><u>Applicants outside North Carolina</u></p> <p>You will need to go to your local law enforcement office to be fingerprinted. Your fingerprints will need to be provided on a FD-258 fingerprint card which can be provided by the law enforcement office. 2 fingerprint cards will need to be submitted.</p> <p>You will need to upload the Authority for Release of Information form to your application via the gateway.</p> <p><u>Applicants in North Carolina</u></p> <p>Live Scan is available to those applicants who are in NC. You will need to go to your local law enforcement office to have this process completed and take the following with you: (1) Applicant Information form, and (2) Electronic Fingerprint Submission Release of Information form.</p> <p>Once the fingerprinting process has been completed, you will need to upload the Electronic Fingerprint Submission Release of Information form to your application via the gateway.</p> <p>The Applicant Information form can be discarded after being fingerprinted.</p>

<input type="checkbox"/>	Interview	You will be notified if a personal interview will be required.
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Annual Renewal: NC law requires licensed physicians to renew with the Board within 30 days of their birthday, every year, no matter when the license is issued. A renewal fee is required.

Updated: 9/21