

## Application for Reinstatement of Physician Assistant License

Item Needed	Instructions	Completed
PA Reference Forms	<p>Three recent (no older than six months) references required. Each must be completed in full with an original signature and date. At least one reference form must be from a physician with whom you have worked or trained regarding your competence to practice as a PA. Two reference forms must be completed by peers (coworker, professor, preceptor, physician) and must be someone with whom you have worked or trained. References must be able to evaluate your academic competence, clinical skills and character as a physician assistant. References cannot be from relatives or fellow students.</p> <p>Send the reference forms to the references.</p>	
Citizenship	<p>U.S. citizens must submit a photocopy of one of the following:</p> <ol style="list-style-type: none"> <li>1) birth certificate</li> <li>2) valid, unexpired U.S. passport</li> <li>3) statement regarding immigration status</li> </ol> <p>Not a U.S. citizen? Provide a photocopy of one of the following:</p> <ol style="list-style-type: none"> <li>1) Alien Registration Card or Green Card (form I-555)</li> <li>2) Employment Authorization Document (form I-688 B or I-766)</li> <li>3) Certification of Report of Birth (form DS-1350)</li> <li>4) Arrival/Departure Record (form I-94)</li> <li>5) Other documentation providing lawful U.S. status</li> </ol>	
Applicant's Oath	Complete, have notarized and send the original form to the NCMB.	
Authority for Release of Information	Complete, sign/date and send the original form to the NCMB. The Board cannot send for your background check report without this form.	
Federation of State Medical Boards	Complete form and fax or mail the form to the Federation of State Medical Boards (FSMB). Address is listed on form. This requirement is non-applicable for PAs who have graduated less than six months ago.	
Fingerprint Cards (2)	Complete two fingerprint cards and return the two completed fingerprint cards to the NCMB along with the Authority for Release of Information Form.	
NCCPA Authorization for Release of Information	Complete form and send to NCCPA. NCCPA's address is on the bottom of the form. Request that NCCPA send the certification exam results to the NCMB.	
CME Summary Log	Send the NCCPA CME Summary Log (with your name typed directly on the summary page by NCCPA) to the NCMB or use the hand written form including your CME for the past two years. This requirement is non-applicable for PAs who have graduated within the past two years.	
Name Change Documentation	Provide copies to the NCMB of your marriage, divorce, adoption, legal name change certificates, if applicable.	