

Military Relocation License Physician Assistant Application Reference Sheet

The North Carolina Medical Board has prepared this reference sheet for military servicemembers or spouses of military servicemembers that have been relocated to North Carolina pursuant to military orders while the Military Relocation License application is being developed. In the interim, please complete the Physician Assistant Full License application. This reference sheet will serve as a guide while you complete your Physician Assistant Full License application, as certain aspects of the Physician Assistant Full License application are not needed for the Military Relocation License. This reference sheet will walk you through the Physician Assistant Full License application step-by-step, noting any special actions, submissions, or exclusions that are needed.

Step	Task	Notes
Step 1	Begin your application.	Read and confirm the acknowledgement
Step 2	Complete the "General Information" section.	<ul style="list-style-type: none"> Answer all the questions under the General Information section. Indicate your practice plan as directed. In this same area, indicate if you are a military service member or spouse.
Step 3	Complete the "Prior Names" section.	
Step 4	Complete the "Address Changes" section.	<ul style="list-style-type: none"> A current North Carolina address is required for licensure. If you have not yet moved to North Carolina, use your current address. You will need to provide documentation of a North Carolina address prior to licensure. Acceptable documentation of your North Carolina address include: a North Carolina driver's license, a utility bill with current address and name, proof of homeownership, or a document specifying housing location related to military orders.
Step 5	Complete sections entitled "Practice Address" through "Immigration Status" as directed.	
Step 6	Complete the "Physician Assistant Education" section.	<ul style="list-style-type: none"> You do <u>not</u> need to provide a Verification of Physician Assistant Education. You <u>must</u> complete the "Physician Assistant Education" component of this section by entering the PA School that you attended.

Step 7	Complete the “Verification of NCCPA” section. This is required.	
Step 8	Skip the “References” section. This is not required.	
Step 9	Complete the “Out of State/Country Licenses” section. This is required.	<ul style="list-style-type: none"> • If you have been licensed in any other state, country, or province, you must report that licensure to the NCMB in this section. • Applicants must secure a report from one state, US territory or Canadian province where they currently hold a full unrestricted active license and have held that license for five years immediately preceding the application. To report this, please complete the License Verification Form. • If you are verifying a license held in the state of Connecticut, you must download the Connecticut Release Form. Complete this form if it is applicable to you.
Step 10	Complete the sections entitled “Criminal History Background Check” through “Information” as directed.	
Step 11	Submit proof of clinical practice.	Please send an email to license@ncmedboard.org certifying that you have provided clinical patient care for an average of 20 hours or more per week for the 2 years immediately prior to this application.
Step 12	Complete your Attestation and Applicant’s Oath.	Applicants <u>must</u> provide a photo of themselves after completing their Attestation and Applicant’s Oath. You can provide this photo here along with this section.