



Mayo School of Graduate Medical Education Tips for Completing the Minnesota Medical License Application

Because there are several steps to the licensure application process, use this guide along with the instructions in the application to walk through the steps for obtaining your MN medical license. If you have questions, contact Tisha Doherty at 507-284-2952 or doherty.tisha@mayo.edu.

MN License Application:

mn.gov/boards/medical-practice/licensing/applicants/apply/

Select Physician Application Option 1 under the Physicians section.

Application Page 1

Name: Use your legal name as it is on your social security card.

Designated Address: Enter: Mayo Clinic 200 1st Street SW, Rochester, MN 55905; Phone 507-284-2511

Private Address:

- The address you list here is where the board will mail your license and correspondence relating to your license.
- **It is imperative to make sure you add to this section a personal email address or an email address that will not be changing during the license process in this section.** Once the MN Board processes your application, the Criminal Background Check (CBC) office will be sending you information regarding fingerprinting to this email address. Watch for this email and get fingerprints **as soon as possible** so your license is not delayed.

Application Page 2

ECFMG Certificate (International Graduates Only)

- Enter your certificate number and issue date.
- Request your certification be sent online directly to the Minnesota Board of Medical Practice cvsonline2.ecfm.org/

Exam History

- If you have scores for all USMLE or COMLEX exams, request 2 copies of the transcripts.
 - Have one sent electronically to the MN Board (you can choose this from the dropdown).
 - Have the other one mailed to you. The cost covers 2 transcripts so you might as well have one sent to you so you have it for future purposes.
- If you do not have scores for all USMLE or COMLEX exams, wait to request transcripts until all scores are available. **You can still send your medical licensure application to the board now and send your scores when you get the Step 3 results.** (Remember to keep a receipt for this fee if you want to be reimbursed.)

Application Page 3

Proposed Practice plans: List Residency or Fellowship

Application Page 4

Activities: During continuous years of education, periods of three months or less (summer breaks) do not need to be accounted for.

Application Page 5

Postgraduate Training: **List all of your postgraduate training here including the training you are currently in.**

Application Pages 9 and 10

- Attach a professional photograph.
 - This page must be notarized. The notarization stamp needs to cover part of the photo.
- **Page 10 needs to be notarized as well.**

Addendum to Application

- Complete all 3 sections
- Section 1 – Business Address
 - Enter: Mayo Clinic, 200 1st Street SW, Rochester, MN 55905
 - **Do NOT** Check I Certify that I am not currently in the workforce related to my practice, and I do not have a business address related to my practice, unless this applies.

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Malpractice History Report

- If no malpractice suits, enter NONE in the 2nd section in the Disposition field.
- Print, sign, and date the form.

Malpractice Liability Claims

- If no malpractice claims you do not need to complete or return this form.
- If you have claims complete the form as instructed.

Facilities List

- Generally, as a resident you do NOT have privileges unless you moonlight. If you do not have privileges:
 - Enter NONE under Current Privileges
 - Enter NONE under Past Privileges
 - Print, sign, and date the form
- If you have/had privileges, complete the form as instructed.

Treating Physician Statement

- If not applicable, write NOT APPLICABLE across the page.

Certification of Medical Education

- Complete the top portion of form and send directly to your medical school for completion. Your medical school should send the form directly to the Minnesota Board (not back to you). Your Medical School needs to mail this form to the MN Board. The board will not accept this via fax.
 - Most medical schools will allow you to email or fax this form to them.

Verification of Post-Graduate Medical Training

- Complete a form for each postgraduate training program completed or in which you are currently enrolled. Send form directly to the program. (International training does not require verification.)
- If you are currently at Mayo Clinic or have completed a training program here previously, fill out the top portion of the form, sign it and upload the form at the following website: college.mayo.edu/academics/residencies-and-fellowships/contact-and-verifications/

Physician Verification of Licensure

- If you have had any permits/licenses in the U.S., go to VERIDOC and request verification be sent to the MN Board.
www.veridoc.org/index.aspx
 - If you have only had a permit/license in MN, verification is not required.
 - If you do not see a permit/license listed in VERIDOC for a permit or license that you have/had, it may be that the state you have/had the permit/license in does not use VERIDOC. In that case, fill out the top portion of this form and send to that states Medical Board. Check the states medical board website as a fee may be required.

Hospital Privileges Verification

- If you listed any hospitals on the Facilities list, send this form to each hospital you listed there.
- If you have not had privileges, do not send this form back to the MN Board.
- International privileges do not need to be verified.

Verification of Specialty Board Certification

- If you took a licensing exam (USMLE, etc.) more than 10 years ago, the MN Board requires Board certification. Follow the instructions on the form.
- If you are not board certified, do not send this form to the MN Board.

Physician Recommendations

- Give form to two licensed physicians; they can be the same two physicians who signed page 9 of the application.
- These physicians cannot be related to you and you need to have known them for at least 1 year. One year needs to be listed on the form.
 - You may need to hold the recommendation forms and ask the physicians to sign at a later date. You can send the license application to the MN board and send these forms at a later date to the MN Board.
 - Completed recommendation forms should be sent directly to the MN Board at the address at the top of the form.

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The DataBank (NPDB/HIPDB) Report www.npdb.hrsa.gov/ext/selfquery/SQHome.jsp

- Place a Self Query Order—on an individual
- There are two scenarios:
 1. If you receive an email with a form to complete:
 - Print, sign, have form notarized and mail it to NPDB
 - Your query will be mailed to you. Send the unopened envelope directly to the MN Board.
 - If you open the envelope, you will be required to have both the query and envelope notarized.
 2. If you receive an email with a pdf attachment of your query report:
 - Print, have query notarized, and mail to the MN Board or
 - Wait for your query to be mailed to you. Send the unopened envelope directly to the MN Board.
 - If you open the envelope, you will be required to have both the query and envelope notarized.

Items To Include With The Application: Your application should be mailed directly to the MN Board.

- Check made out to Minnesota Board of Medical Practice for the amount listed on the application.
- Notarized copy of Driver's license
- Copy of your medical school diploma—if an international graduate, your diploma needs to be notarized and be in English
- Copy of postgraduate training certificate/s—if you were given one
- Notarized copy of the NPDB query if you printed off the pdf version or the NPDB envelope. This can also be sent separately.
- Notarized copy of name change (marriage certificate, etc.) if name does not match diploma
- International graduates only—notarized copy of passport/birth record
- International graduates only—ECFMG certificate

Items To Have Notarized

- Certificate of Ethical & Moral Character – Page 9
- Affidavit & Release – Page 10
- Driver's License
- NPDB
- Name change if your name does not match your diploma

International Graduates need these additional items notarized as well:

- Copy of medical school diploma in English
- Copy of passport/birth record

Criminal Background Check/Fingerprinting

The MN Board requires a Criminal Background Check/Fingerprinting.

Once the MN Board receives your application they will send you a packet of information regarding the criminal background check process. When you receive this packet, take care of this ASAP.

An overview of the process can be found here: mn.gov/boards/cbc/process/

Remember:

- To be reimbursed for the license and licensure fees, save all receipts electronically.
Suggestion: Scan all receipts and email them to yourself so you have them when you arrive.
- The MN Board does not issue a receipt; you will need to have a copy of your check available for reimbursement. If you do not keep a copy of the check you will need to contact the MN Board directly and ask for a receipt if you want to be reimbursed.
- MCSGME does not reimburse for Federation Credentials Verification Service (FCVS). You can use FCVS, but will not be reimbursed.
- Keep a copy of the entire application. It may be helpful when completing forms for future licenses or other required forms.
- If you have any questions, please ask.