

GEORGIA COMPOSITE MEDICAL BOARD



2 MLK JR Drive, SE, East Tower, 11th Floor, Atlanta, GA 30334

<http://www.medicalboard.georgia.gov>

APPLICATION FOR INACTIVE STATUS Physician

Fee for Inactive Status: \$200.00

Remit Check or Money order to the Georgia Composite Medical Board.

NAME: _____

ADDRESS: _____

City	State	Zip Code
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Phone Number: _____

LICENSE NUMBER: _____

INACTIVE STATUS REQUEST DATE: _____

(Request will be processed on date received)

Board Rule 360-2-.06: Inactive Status. Amended.

A licensee who wishes to maintain his or her license but who does not wish to practice medicine and surgery in this State may apply to the Board for inactive status by submitting an inactive application and the applicable fee. A licensee with an inactive license may not practice medicine in this State.

I understand that my license will become inactive and that I may not practice medicine in the State of Georgia once my inactive application and fee are received and processed by the Board.

Signature

Date