FORM A
Exceptional Circumstances Consideration Form
INSTITUTION/CLINIC

Please print legibly:

Institutional Physician Name ____
Last Name First Name Middle

Institutional Physician Specialty:____

Supervisory Oversight Physician:________________________ ___**MD**____**DO**
(Supervisory Oversight means the onsite direction of the supervisor with immediate availability.

Does your supervisory oversight physician have an unrestricted license to practice medicine in the State of Georgia?______YES _____NO

Supervisory Oversight Physician Specialty:____
(must be same as that of the applicant physician)

Type of Supervision Being Provided:____

____

Institution Name: ____

Institution Address:____

____
City State Zip Code Phone Number

1. Is this institution or clinic in a medically underserved area?
   _____YES _____NO

   If yes, please submit evidence. Such evidence should include but not be limited to:
   (a) Deficient physician staff to service the health care needs of the population.
   (b) Institution can demonstrate failed attempts to recruit licensed physicians to satisfy the deficiency.

2. Is this institution licensed by the Department of Community Health?
   _____YES _____NO

3. Is this physician applicant a graduate of an international medical school and does not qualify for licensure under other provisions of Chapter 43-34-26?
   _____YES _____NO

NOTE: The Board may require the physician applicant and a representative of the institution to appear for a personal interview before the Board or the committee.

I swear that the information provided in this application is true and correct to the best of my knowledge.

______________________________ ______________________________

Hospital Administrator / Clinic Owner Signature **Date Signed**

______________________________ ______________________________

Applicant Physician Signature **Date Signed**

Return the completed form to:
Georgia Composite Medical Board
Attention: Institutional Physician Licensure
2 Peachtree Street, N.W., - 6th Floor
Atlanta, GA 30301