



## **DO NOT SUMBIT APPLICATION WITHOUT ALL THE FOLLOWING:**

- **Application form:** Apply through the online application portal at <https://gcmb.mylicense.com/egov/>
- **Application fee (\$500.00):** Pay through the online portal via credit card.
- **Current CV or Resume:** Include education/training, practice history, and date gaps (if any).
- **Reference Form:** Three references are required; each reference should complete the form and scan/send it to the Board via email.
- **Affidavit of Applicant:** Include passport photo; notarize, sign, and date.
- **Citizenship Affidavit:** Notarize, sign, and date.
- A copy of a secure and verifiable document from the list following **Citizenship Affidavit**.
- **Malpractice Questionnaire:** Required of all applicants. Including documentation of any cases (if applicable).
- **Military discharge documentation:** Form DD-214 (if applicable)
- **Explanations and documentation:** For any arrests, convictions, disciplinary actions, license denials, etc.
- **Federation Credentials Verification Service receipt:** See below if you are not using FCVS.
- **Specific Power of Attorney form:** if you are authorizing GCMB to discuss your application with someone other than the applicant.

### **Submit the following items if you are not using Federation Credentials Verification Service**

- **Official transcript from your medical school:** issued to the Georgia Composite Medical Board.
- **Notarized translation of your medical school transcript:** if the official transcript is not in English.
- **Official licensing examination score transcript:** issued to the Georgia Composite Medical Board, or proof you have ordered the transcript for electronic delivery to GCMB.
- **Certificate of Postgraduate Training:** For each training program you attended. The residency program should complete the form and email it to the Board.
- **A copy of your ECFMG certificate:** If you graduated from a medical school located outside the United States or Canada.

### **Submit the following items if you have ever held a license to practice medicine**

- **National Practitioner Data Bank (NPDB) Self-Query**
- Official license verification from each state, territory, or province of the U.S. or Canada in which you have held any type of medical license, including training, limited, or restricted licenses (If you ordered a license verification from Veridoc, submit a printed copy of the receipt showing the state or states you ordered).

**PLEASE SUBMIT ALL ITEMS IN THE ONLINE PORTAL AT THE TIME OF APPLICATION.**