

NORTH DAKOTA STATE BOARD OF MEDICAL EXAMINERS

MAKING APPLICATION FOR A LICENSE TO PRACTICE AS A PHYSICIAN ASSISTANT IN NORTH DAKOTA

SUMMARY OF PHYSICIAN ASSISTANT LICENSURE REQUIREMENTS

To become eligible to practice as a physician assistant in North Dakota, the PA:

1. Must have passed the certifying examination of the National Commission on Certification of Physician Assistants;
2. Must provide evidence of current “good standing” with the National Commission on Certification of Physician Assistants, and;
3. Must secure a contract to provide patient services under the supervision of a doctor of medicine or osteopathy who practices medicine in North Dakota and who is responsible for the performance of the physician assistant.

INSTRUCTIONS

1. Complete every section of each form. Type or print legibly on all forms. The application cannot be submitted online.
2. The application form (hard copy) must be returned to the Board’s office along with the following documents:
 - a. \$97.25 application and criminal background check fees (payable by check or money order only in U.S. currency). Includes application fee of \$50.00 and criminal background check fee of \$47.25.
 - b. A notarized or certified copy of your current NCCPA Certificate.
 - c. The completed Supervision Contract form. This form should be completed with the assistance of your supervising physician(s).
 - d. A recent 2"x 3" unmounted photo of yourself - this photo should be affixed to Page 5 of the application.
 - e. You must direct the licensing board of each state/providence where you have ever applied for any type of medical license (regardless of whether the license was granted or not granted, is active or inactive, temporary or permanent, restricted or unrestricted) to provide the North Dakota Board of Medical Examiners with verification of your licensure status.
 - f. You must complete and submit the enclosed Authorization for Criminal Record Inquiry form and two fingerprint cards.

You should call your local law enforcement office for times and locations that fingerprinting services are available. Please be sure to bring a photo ID. A small fee (\$5-\$10) may be required.

DO NOT BEND OR FOLD the fingerprinting cards when mailing them to us as they will be rejected and you will be required to be fingerprinted again. Be sure all personal information is completed on the cards.

NOTE: WE WILL NOT BEGIN PROCESSING THE APPLICATION UNTIL THE PERSONAL AUTHORIZATION FOR CRIMINAL RECORD INQUIRY AND FINGERPRINTING CARDS (2) ARE RECEIVED.

3. Please keep a copy of the completed contract and application forms for your own files.
4. Your application and supporting documents should be mailed to:

NORTH DAKOTA STATE BOARD OF MEDICAL EXAMINERS
CITY CENTER PLAZA
418 EAST BROADWAY AVE., SUITE 12
BISMARCK, ND 58501

Interviews

Any applicant may be required to appear before the Board of Medical Examiners for an interview. An applicant should expect to appear for an interview if any derogatory information is brought to the attention of the Board during the application process.