

## ***Tips for Completing the Minnesota Medical License Application***

Because there are several steps to the licensure application process, use this as a guide along with the instructions in the application for obtaining your MN medical license. **This is only a guide, whatever is listed in the application supersedes this guide.** If you have questions, please contact Tisha Doherty at 507-284-2952 or [doherty.tisha@mayo.edu](mailto:doherty.tisha@mayo.edu).

**For incoming trainees** who will be starting training at Mayo Clinic who meet the full licensure requirements, your license should be issued at least one month prior to your start date. It would be best to start the full licensure process prior to February of the year you will be starting.

**For internal trainees** who are currently in training at Mayo Clinic and are becoming eligible for the full license your application MUST be received by the MN Board **by April 1<sup>st</sup> and your full license issued prior to August 1<sup>st</sup>.** **Fingerprints must be submitted by May 15<sup>th</sup>.**

Once your application is received by the MN board you will be emailed fingerprinting instructions from the Criminal Background Check office within 2-5 days. If you do not receive the email, contact the MN Board (612-617-2130 or email [medical.board@state.mn.us](mailto:medical.board@state.mn.us)). Further details for the fingerprinting piece can be found at the bottom of this guide. The Fingerprints MUST be completed and sent to the CBC office. **It takes 3-4 weeks for the CBC to process your fingerprints and your full license cannot be issued until fingerprints are processed, it is imperative that you complete these timely.**

**Failure to complete these steps and or failure for your full license to be issued by the dates above could result in disciplinary action and or delay in starting your program.**

MCSGME will provide reimbursement of licensure fees. MCSGME will NOT reimburse for the initial set up fee for FCVS. You can use FCVS, but it is NOT reimbursable. Keep a copy of all receipts, as receipts are required for reimbursement.

For Internal current Mayo Clinic trainees, you can use the following instructions to submit for reimbursement: [Instructions for Reimbursement-Creating Expense Report](#)

For Incoming trainees who will be starting, reimbursement instructions will be emailed once you start your program. Access to the Oracle system is needed to submit/process reimbursements and this does not happen until you start.

The Physician online application is found here: <https://mn.gov/boards/medical-practice/licensing/applicants/apply/>

1. Under Physicians select Online Physician Application
2. Select Register to access site.
3. Select register under new user.  
Complete the required information.  
Select Next
4. Follow the steps outlined to set up an account
5. Login using the login you just created
6. In the General Box Select Apply for a License
7. Under Type select Physician and Surgeon  
Under Basis select the exam type you have taken (USMLE, COMLEX, LMCC) etc.
8. Complete the acknowledgement portion.  
Click Continue
9. Name: Use your legal name as it is on your social security card.  
If you currently do not have a social security number, please email: [medical.board@state.mn.us](mailto:medical.board@state.mn.us)  
Enter all required information.
  - Make sure you enter an email address as this is where the board will send fingerprint instructions to.
  - For the Designated and Business address list: 200 First ST SW Rochester, MN 55905
  - **\*\* DO NOT CHECK:** I certify that I am not currently in the workforce, and I don't have a business address related to my practice, unless this applies to you.
  - For the Private address list your personal address.
  - Enter your phone number, you can enter multiple phone numbers. You can list your personal phone and then also list the main Mayo Clinic phone number and select this one as designated, for this list 507-284-2511 or you just list the Mayo Clinic phone number as the designated.
10. Enter military information.

11. Enter your medical school information.
12. Enter in your post graduate training information.
13. Enter in your exam information and dates.
14. Enter in your license information.
  - In addition to entering your license information: If you have had any type of MD/DO permit/license in the U.S., go to VERIDOC and request verification to be sent to the MN Board. <https://www.veridoc.org/>
  - **If you have only had a residency permit in MN, verification is not required to be sent to the board.**
  - 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 had the permit/license in does not use VERIDOC. In that case, go to that board's respective website and request that verification be sent to the MN Board. The MN Board requires verification for all types of **medical licenses held**, this means other types of licenses as well even if they are expired. Please go to that respective boards website if you hold or have held another type of medical license as the board will require verification of it. (International Licenses do not need to be verified.)
15. Enter in your board certification/s information if applicable.
16. Enter Criminal Convictions information if applicable.  
Answer all criminal conviction questions.

### Supporting Documents

#### The following supporting documents must be uploaded to your application.

The board may update these documents periodically without MCSGME knowledge and the links below may break, please follow the instructions and forms within the application. This is only a guide, whatever is listed in the application supersedes this guide.

1. Medical school diploma
2. Postgraduate training completion certificate (if issued)
3. Copy of current government issued photo ID.
4. [Facility list form](#)
  - a. Generally, as a resident you do NOT have privileges unless you moonlight. If you do not have privileges:
    - i. Enter NONE under Current Privileges
    - ii. Enter NONE under Past Privileges
    - iii. Print, sign, and date the form.
    - iv. If you have/had privileges, complete the form as instructed.
5. [Malpractice history report form](#)
  - a. If no malpractices suits, enter NONE in the 2<sup>nd</sup> section in the Disposition field.
  - b. Print, sign, and date the form.
6. [Malpractice liability claims information form](#) (if applicable)
  - a. If no malpractice claims, you do not need to complete or return this form.
  - b. If you have claims complete the form as instructed.
7. Malpractice supporting documentation (if applicable)
8. Supporting documentation related to affirmative response to attestation question and/or criminal conviction (if applicable)
9. Name change documentation (if applicable)
10. [Physician Certificate of Ethical and Moral Character](#)
  - a. This form needs to have your photo attached and be notarized. Most banks have a notary on staff, you can also find notaries at your local UPS, or some government agencies. If you are a current Mayo Clinic trainee, you can use the Mayo Clinic concierge service for notary services by calling 53(8-8438).
  - b. If you are a current Mayo trainee you can download a copy of your directory photo here: [Mayo Clinic](#) search by your name and download the photo, you can either copy and paste the photo to the form or print the photo out on a colored printer and attach to the form.
11. [Affidavit and release form](#)
  - a. This form needs to be notarized as well.
12. Documentation of your current military status (if active duty) or discharge papers (DD Form 214) (if applicable)
13. NPDB self-query report <https://www.npdb.hrsa.gov/>
  - a. Complete a Self-Query, select Personal Query and upload query result report to your application.

**The following documents are required to be received by the board as well:**

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1. Exam transcript (obtain from FSMB, NBOME, or other entity)

- a. Log into FSMB/NBOME or other site that pertains and have an official transcript sent of all your exams (USMLE, COMLEX, MCCQE) directly to the MN Board.
  - i. If you do not have scores for all steps of USMLE or COMLEX exams, wait to request transcripts until all scores are available. You should still submit the license application to the board now and send your scores when you get the Step 3 results. (Keep a receipt for this fee if you want to be reimbursed.)
  - ii. If you have scores for all USMLE exams, request 2 copies of the transcripts. Have one sent electronically to the MN Board choose this from the dropdown. Mail the other one to your home address. The fee covers 2 transcripts.

2. Direct verification of medical school

- a. Complete the top portion of the form and email the form to your medical schools' registrar. Your medical school needs to send this form directly to the MN Board.

3. Direct verification of postgraduate training

- a. Complete the top portion of the form and follow the steps outlined below.
  - i. If you have completed training **outside** of Mayo Clinic send the form to your program or post graduate school office to complete. (a form is needed for **each** post graduate training school you have completed or which you are currently enrolled in. (International training does not require verification.)
  - ii. If you have or are **currently** in a training program at Mayo Clinic complete the following steps: Complete the top portion of the form (only one form needs to be submitted even if you have completed more than 1 year of training at Mayo Clinic):
    - Print Name, birthdate, last 4 of SSN, sign, date, list training dates.Complete the following information listed under the middle section.
    - List your name in the Name of Applicant field exactly as you did in the top section.
    - For name of Hospital or Institution: Mayo Clinic School of Graduate Medical Education
    - Location: 200 First Street SW, Rochester, MN 55905 or 101 Martin Luther King Jr Dr, Mankato, MN 56001 if you will be Mankato based.

Complete the following located at the bottom of the form under Completed by Program Director or GME:

- Phone: 507-538-7129
- Fax: 507-538-0771
- Email: msgmeverification@mayo.edu

Submit the form to the following link: [Post Graduate Training Verification](#)

The Authorization form linked in the instructions needs to be completed. Enter first name, last name, grad. year, for requester contact information enter your information. Verification type: select state licensing board form. Upload both the authorization form and MN board verification form

NOTE: The verifications team cannot send this form to the MN Board until June 30<sup>th</sup>, but please submit this form now and the verifications team will hold this and send it in June.

4. Direct verification of ECFMG (International graduates)

- a. <https://cvsonline2.ecfm.org/>

If you are using FCVS, the following items will be covered in your packet, and you do not need to submit them:

1. Exam transcript
2. Direct verification of medical school
3. Copy of medical school diploma
4. Direct verification of postgraduate training (only accredited programs)
5. Direct verification of ECFMG (if applicable)
6. NPDB self-query report

**Payment:**

Make payment using credit card. Keep a receipt for reimbursement and submit your expense report using the instructions mentioned at the beginning of this guide.

**Criminal Background Check/Fingerprinting:**

The MN Board requires a Criminal Background Check/Fingerprinting. This is a separate process from the background check you need to complete for Mayo Clinic.

Once the MN Board receives your application, you will receive a packet of information regarding the criminal background check process to the email address you provided on the application. Please watch for this email. When you receive this packet, please take care of this ASAP. If you do not receive this email within 2-5 days of submitting your application, contact the MN Board and request that the email be sent to you. The board can be reached at 612-617-2130.

If you are a current Mayo Clinic trainee or reside in Rochester, you can set up a time with the Olmsted County Sheriff's Office to have the fingerprinting portion done. There is a \$10 fee for this. Cash or check is all that is accepted for payment. You can schedule a time to do this at the following link:

<https://www.olmstedcounty.gov/government/county-departments/sheriffs-office/adult-detention-center-adc/fingerprinting>

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

Remember to keep a receipt or copy of your check for all fees if you want to be reimbursed.

More information can be found on the MN board of Medical Practice website:

<https://mn.gov/boards/medical-practice/>

**Status of Application:**

You can monitor the status of your application by logging into your application.