

Michigan Department of Licensing and Regulatory Affairs
Bureau of Health Professions

P.O. Box 30670
Lansing, MI 48909
Fax: (517) 241-1212
www.michigan.gov/healthlicense

REQUEST FOR PUBLIC RECORDS

Authority: Michigan Freedom of Information Act, 1976 PA 442, as amended

Please TYPE or PRINT Clearly

Requestor's Name		Telephone Number with Area Code	
Company Name		Fax Number with Area Code	
Street Address			
City	State	Zip Code	

REQUESTING INFORMATION ON THE FOLLOWING LICENSEE:

Name of Licensee	Type of Profession (MD, DO, RN, LPN, etc.)
MI License Number	File Number (if known)
Please describe the public disciplinary record as specifically as possible (date of occurrence, hospital, etc.):	
Signature of Requestor	Date

The Department of Licensing and Regulatory Affairs will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.