

Michigan Department of Licensing and Regulatory Affairs
 Corporations, Securities & Commercial Licensing Bureau
 Schools and Licensing Section
 P.O. Box 30018, Lansing, MI 48909
 517-241-9221
 www.michigan.gov/ucc

FOR OFFICE USE ONLY	
Approved By:	
Date Approved:	
License Number	

APPLICATION FOR MEDICAL RING SIDE PARTICIPANT LICENSE

AUTHORITY: 2004 PA 403, MCL 338.3434(A), AND 42 USC 654
 PENALTY: FAILURE TO PROVIDE THIS INFORMATION MAY RESULT IN DENIAL OF THE APPLICATION AND/OR DISCIPLINARY ACTION.

Name (First, Middle, Last)					
Permanent ID # (if applicable)		Date of Birth (if individual)		US Social Security Number (if individual)	
Address			City		
State	Zip Code	Telephone Number		E-Mail Address	

Check type of license applying for and provide your active License Number:

- Physician License #: _____ State: _____
- Physician Assistant License #: _____ State: _____
- Nurse Practitioner License #: _____ State: _____

Certification:

I certify that the statements in this document are true and complete. I understand that any omitted statement, misrepresentation, or fraud may be cause for denial of my application, disciplinary action, or may be punishable by law. I agree the Department is required by law to obtain my social security number pursuant to MCL 338.3434(a).

Signature _____ Date _____

FEE PAYMENT INFORMATION (Check One Box)		FOR OFFICE USE ONLY	FOR OFFICE USE ONLY - VALIDATION
Physician	Fee: \$180.00	(1507-01=\$ 30.00) (1507-07=\$150.00)	
Physician Relicensure	Fee: \$200.00	(1507-01=\$ 30.00) (1507-07=\$150.00) (1507-23=\$ 20.00)	
Physician Reinstatement	Fee: \$30.00	(1507-50=\$ 30.00)	
<input type="checkbox"/> Physician Assistant	Fee: \$100.00	(1508-01=\$ 30.00) (1508-07=\$ 70.00)	
<input type="checkbox"/> Physician Assistant Relicensure	Fee: \$120.00	(1508-01=\$ 30.00) (1508-07=\$ 70.00) (1508-23=\$ 20.00)	
Physician Assistant Reinstatement	Fee: \$30.00	(1508-50=\$ 30.00)	
Nurse Practitioner	Fee: \$100.00	(1509-01=\$ 30.00) (1509-07=\$ 70.00)	
Nurse Practitioner Relicensure	Fee: \$120.00	(1509-01=\$ 30.00) (1509-07=\$ 70.00) (1509-23=\$ 20.00)	
Nurse Practitioner Reinstatement	Fee: \$30.00	(1509-50=\$ 30.00)	

Make your check or money order in U.S. Currency payable to:
STATE OF MICHIGAN

FEEES ARE AUTHORIZED UNDER 2004 PA 403