

# **NOTICE TO RADIATION ONCOLOGY/THERAPY, MEDICAL RADIATION AND NUCLEAR MEDICINE TECHNOLOGISTS**

The Maryland Board of Physicians (the Board) issues certifications to eligible applicants year round. If deemed eligible for certification, when do you wish to be certified? Please read Page 2 carefully, make your choice, complete the form, and mail it back to the Board.

Thank you for your cooperation.

**PLEASE COMPLETE PAGE 2 OF THIS FORM**

**MARYLAND BOARD OF PHYSICIANS**

P.O. Box 2571

Baltimore, MD 21215-0095

**APPLICATION FOR CERTIFICATION OF RADIATION ONCOLOGY/THERAPY, MEDICAL RADIATION AND NUCLEAR MEDICINE TECHNOLOGISTS**

**THIS IS NOT A RENEWAL APPLICATION. COMPLETE THIS FORM ONLY IF YOU ARE REQUESTING LICENSURE/CERTIFICATION TO PRACTICE IN MARYLAND.**

**IF YOU ALREADY HAVE A LICENSE/CERTIFICATE TO PRACTICE, BUT NEED TO RENEW IT, CLICK THE LINK BELOW TO DOWNLOAD A RENEWAL APPLICATION.**

[http://www.mbp.state.md.us/forms/NORM\\_2007\\_ren.pdf](http://www.mbp.state.md.us/forms/NORM_2007_ren.pdf)

*Applicant's Preferred Date of Certification*

**Instructions:** Please read carefully **Part A**. Then complete **Part B** and send this form back to the Maryland Board of Physicians (the Board) at the above address.

**Part A:** In Maryland, certifications are issued to eligible applicants year round. Radiation Oncology/Therapy, Medical Radiation, and Nuclear Medicine Technologists certification must be renewed by its expiration date of April 30, 2007.

The renewal payment is **\$79.50**. Applicants who mail a renewal application that is received legibly postmarked after April 30, 2007 will have to reinstate their certification. The fee for certification is **\$104.50**.

If determined eligible for certification, you may choose to be reinstated either BEFORE April 30 or AFTER April 30 of this year. The examples below show the effect of the expiration date of a certification on the date that the certification must be renewed.

1. Ms. B is certified in March 2006. The expiration date of the certification is April 30, 2007. Ms. B will be required to renew her certification and pay the renewal application fee by April 30, 2007.
2. Mr. L completed the form below indicating that if determined eligible for certification, he would like to be certified in May 2007. If Mr. L is certified in May 2007, the first time he will be required to renew his certification and pay the renewal application fee is by April 30, 2009.

**Part B:** Please make your choice, print your name, sign and date the form, and return it to the Board.

- \_\_\_\_\_ 1. If determined eligible for certification, I want to be certified BEFORE April 30, 2007. If certified, I understand that I will be required to renew the certification and pay a renewal application fee by the certification's expiration date, April 30, 2007. Further, I understand that a certificate will be issued to an eligible applicant only upon receipt by the Board of this signed form.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name in Print: \_\_\_\_\_

- \_\_\_\_\_ 2. If determined eligible for certification, I want to be certified AFTER April 30, 2007. If certified, I understand that the certification will be effective May 1, 2007 and expire April 30, 2009. I **CANNOT** work as a radiation oncology/therapy, medical radiation or nuclear medicine technologist in Maryland prior to May 1, 2007. Further, I understand that a certificate will be issued to an eligible applicant only upon receipt by the Board of this signed form.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name in Print: \_\_\_\_\_