

**MARYLAND BOARD OF PHYSICIANS**

P.O. Box 37217  
Baltimore, MD 21297  
410-764-4705 or 1-800-492-6836  
www.mbp.state.md.us

**Name Change Application for Physicians**

**Maryland Annotated Code, Health Occupations Article §14-314  
COMAR 10.32.01.15 and 16**

In order to receive a name change the Maryland Board of Physicians requires the licensee to submit:

1. The enclosed application completed and signed. Sign and date the application in the presence of a notary public after you have affixed a recent passport quality photo or clear photocopy of a valid driver's license with photo to the application.
2. Return the two portions of the current original license that contains your name, license number and expiration date.
3. A certified copy of a marriage license, divorce decree, court order, or other document indicating the name change, date and place of change.
4. A *passport quality photograph* taken within 60 days of the application and affixed to the application. Licensee may attach a clear photocopy of a valid driver's license with photo.
5. \$25 fee for replacement license.
6. Check or money order made payable to the Maryland Board of Physicians.

Please be aware that Health Occupations Article §14-314(b) states that, "A licensee may practice medicine using only the name in which the license is issued." Regulation .11 under COMAR 10.32.01 General Regulations states that the Board will charge a \$25 fee for a replacement license.



## **IDENTIFICATION CARD**

This space to contain a clear permanent recent photograph of the applicant.

Photo must be securely pasted in place.

Newspaper photograph, copies of photo, photos of multiple people, etc., not acceptable.

**PLEASE DO NOT STAPLE**