

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

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

Thank you for your cooperation.

PLEASE COMPLETE THE FOLLOWING PAGE OF THIS FORM.

MARYLAND BOARD OF PHYSICIANS

P.O. Box 2571

Baltimore, MD 21215-0095

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

Applicant's Preferred Date of Certification

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

Part A: In Maryland, licenses are issued to eligible applicants year round. Radiation Oncology/therapy, Medical Radiation, and Nuclear Medicine Technologists licenses must be renewed by its expiration date of April 30, 2005.

The renewal payment is \$77.00. Applicants who mail a renewal application that is received legibly postmarked after April 30, 2005 will have to reinstate their license. The fee for reinstatement is \$102.00.

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

1. Ms. B is licensed in March 2005. The expiration date of the license is April 30, 2005. Ms. B will be required to renew her license and pay the renewal application fee by April 30, 2005.
2. Mr. L completed the form below indicating that if determined eligible for certification, he would like to be licensed in May 2005. If Mr. L is licensed in May 2005, the first time he will be required to renew his license and pay the renewal application fee is by April 30, 2007.

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 licensed BEFORE April 30, 2005. If licensed, I understand that I will be required to renew the license and pay a renewal application fee by the license's expiration date, April 30, 2005. Further, I understand that a license 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 licensed AFTER April 30, 2005. If licensed, I understand that the license will be effective May 1, 2005 and expire April 30, 2007. I **CANNOT** work as a radiation oncology/therapy, medical radiation or nuclear medicine technologist in Maryland prior to May 1, 2005. Further, I understand that a license will be issued to an eligible applicant only upon receipt by the Board of this signed form.

Signature: _____ Date: _____

Name in Print: _____