

TEMPORARY LICENSE APPLICATION CHECK LIST

After completing the online uniform application, you are responsible for submitting certain documents as part of the application. Use this checklist to ensure that you are submitting the appropriate documents for temporary licensure. The check list indicates the requirements for those who are using the Federation Credentials Verification Service (FCVS) and for those not using FCVS. Follow the list that applies to you.

	NOT using FCVS to verify credentials	Using FCVS to verify credentials
Completed Uniform Application (UA) – Application Part 1	<input type="checkbox"/>	<input type="checkbox"/>
Completed Application Addendum-Application Part 2 through the board’s online services website at www.medicalboard.iowa.gov	<input type="checkbox"/>	<input type="checkbox"/>
Affidavit and Authorization for Release of Information form sent to the Board	<input type="checkbox"/>	<input type="checkbox"/>
Copy of any medical license you hold to the Board	<input type="checkbox"/>	<input type="checkbox"/>
State Licensure Verification Form #1 sent to the Board from all countries in which you have ever held medical and/or other professional license <u>outside</u> the U.S. or Canada	<input type="checkbox"/>	<input type="checkbox"/>
Request a letter from the organization/individual seeking your service that explains the need for your participation in the board-approved activity, the time period involved, scope of practice, the exact location/facilities of the activity, and who the immediate supervisor will be.	<input type="checkbox"/>	<input type="checkbox"/>
Fluency in English language demonstrated by having either a valid ECFMG certificate or a passing score on the TSE or TOEFL, if you are an international medical graduate who does not have a U.S. or Canadian medical license.	<input type="checkbox"/>	<input type="checkbox"/>
Statement Justifying Need for License sent to the Board	<input type="checkbox"/>	<input type="checkbox"/>
Supporting documentation of any legal name change sent to the Board	<input type="checkbox"/>	Completed via FCVS
Copy of medical diploma sent to the Board	<input type="checkbox"/>	Completed via FCVS