POSTGRADUATE TRAINING LICENSE INFORMATION

A postgraduate training license (PTL) must be obtained from the Medical Board of California (Board) within 180 days after enrollment in an Accreditation Committee for Graduate Medical Education (ACGME) accredited postgraduate training program in California. The PTL will be valid until 90 days after a resident has received 12 months credit of Board-approved postgraduate training for graduates of medical schools in the United States and Canada or 24 months of Board-approved postgraduate training for graduates of international medical schools approved under Business and Professions Code (BPC) section 2084, after which a full and unrestricted physician’s and surgeon’s certificate must be obtained in order to continue practicing medicine in California.

MINIMUM REQUIREMENTS

➢ To be eligible for a PTL, the applicant must be enrolled in an ACGME-accredited postgraduate training program in California.

➢ Applicant must have received all of their medical school education from and graduated from a:

1) U.S. or Canadian medical school accredited by the Liaison Committee for Medical Education (LCME), the Committee on Accreditation of Canadian Medical Schools. https://lcme.org/directory/accredited-u-s-programs/

- OR -

2) A foreign medical school which has been evaluated by the Educational Commission for Foreign Medical Graduates (ECFMG) or one of the ECFMG authorized foreign medical school accreditation agencies and deemed to meet the minimum requirements substantially equivalent to the requirements of medical schools accredited by the Liaison Committee on Medical Education, the Committee on Accreditation of Canadian Medical Schools, or the Commission on Osteopathic College Accreditation.

The foreign medical school is listed on the World Federation for Medical Education (WFME) and the Foundation for Advancement of International Medical Education and Research (FAIMER) World Directory of Medical Schools joint directory, or the World Directory of Medical Schools. https://search.wdoms.org/

- OR -

3) A foreign medical school that has been approved by the Board. http://www.mbc.ca.gov/Applicants/Medical_Schools/Schools_Recognized.aspx

➢ Disclosure of a United States Social Security Number (SSN) or an Individual Taxpayer Identification Number (ITIN) is mandatory prior to the issuance of a PTL. Section 30 of the BPC authorizes collection of an SSN or ITIN. Section 31(e) of the BPC allows the State Board of Equalization and the Franchise Tax Board to share taxpayer information with the Board.

➢ To meet the minimum examination requirement for a PTL, you must have taken and passed Steps 1 and 2CK of the United States Medical Licensing Examination (USMLE) or Part I of the Licentiate of the Medical Council of Canada (LMCC) examination per Title 16 of the California Code of Regulations section 1328.

➢ Certification by the Educational Commission for Foreign Medical Graduates (ECFMG) is required if the applicant graduated from a foreign medical school. To obtain further information regarding ECFMG Certification, please refer to their website at http://www.ecfmg.org/.
GENERAL INFORMATION

▶ Fingerprinting: Applicants who reside in California must complete the electronic Live Scan fingerprint process. The Request for Live Scan Service form may be obtained from the Board’s website. Please refer to the following website for Live Scan facilities in California: https://oag.ca.gov/fingerprints/locations.

Applicants residing outside of California must submit two completed fingerprint cards or, if visiting California, may have their fingerprints completed electronically at a California Live Scan facility.

The Board must receive Criminal Records Check from both the California Department of Justice and the Federal Bureau of Investigation prior to the issuance of a PTL.

▶ Grounds for Denial: Each applicant’s credentials for licensure in California are reviewed on an individual basis. The Board has the authority to deny licensure based upon an applicant’s act of dishonesty, unprofessional conduct, conviction of a crime, discipline by a licensing board in or outside of California, or inability to practice medicine safely.

▶ Priority Review and Expedited Licensure:

Honorably Discharged Veterans of the United States Armed Forces
The Board is required to expedite the licensure process for applicants who have served as active-duty members of the United States Armed Forces and were honorably discharged. (BPC section 115.4)

For an applicant’s license to be expedited, the applicant must:

• Submit their official orders issued by the United States Armed Forces indicating that they have been, or will be, honorably discharged.

Spouse or Domestic Partner of an Active-Duty Member of the United States Armed Forces
The Board is required to expedite the licensure/registration process for spouses and domestic partners of those on active-duty in the United States Armed Forces who are assigned to a duty station in California under official active-duty military orders. (BPC section 115.5)

For an applicant’s license to be expedited, the applicant must:

• Submit evidence that they are married to, or in a domestic partnership or other legal union with, an active-duty member of the United States Armed Forces who is assigned to a duty station in California under official orders, and;
• Submit evidence of their spouse’s or domestic partner’s official assignment to a duty station in California, and;
• Hold a current license/registration in another state, district or territory of the United States in the profession or vocation for which the applicant is seeking a license/registration.

Admitted to the United States as a Refugee, Granted Asylum, or Have a Special Immigrant Visa Status
BPC section 135.4 provides that the Board must expedite, and may assist, the initial licensure process for certain applicants described below. To have the application expedited, one of the following statements must apply:

• The applicant was admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code;
• The applicant was granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code; or,
• The applicant has a special immigrant visa and was granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.
GENERAL INFORMATION (Continued)

Priority Review and Expedited Licensure: (Continued)

Admitted to the United States as a Refugee, Granted Asylum, or Have a Special Immigrant Visa Status (Continued)

Failure to provide satisfactory evidence may result in application review delays. The following may be accepted as satisfactory evidence:

- Form I-94, Arrival/Departure Record, with an admission class code such as “RE” (Refugee) or “AY” (Asylee) or other information designating the person a refugee or asylee.
- Special immigrant visa that includes the “SI” or “SQ.”
- Permanent Resident Card (Form I-551), commonly known as a “Green Card,” with a category designation indicating that the person was admitted as a refugee or asylee.
- An order from a court of competent jurisdiction or other documentary evidence that provides reasonable assurance that the applicant qualifies for expedited licensure.

Third Party Services: The applicant may use electronic commercial services to assist in completing their application for licensure. The Board does not mandate any of the electronic services. For additional information, visit the Board’s website. The Board is providing this information as a convenience to our applicants.

APPLICATION CHECKLIST

Listed below are the minimum application materials and supporting documentation required for a medical school graduate to obtain a PTL. This list is not all-inclusive as additional items may be necessary based on responses provided on the application or information obtained from other entities.

Application, Fees, and Fingerprints

☑ Postgraduate Training License Application, Forms PTL1-PTL4

You must complete all fields, answer all questions, and submit all four pages of the application together.

If you are submitting your application online using the BreEZe online services system, attach a 2” by 2” photo to your online application. The photo must be recent and must be of your head and shoulder areas only. Altered photos are NOT acceptable.

☑ Application Fee - $674.00

The application fee includes the required $49 fingerprint-processing fee. The fees are non-refundable.

☑ Fingerprints:

- Live Scan Form (CA Only) - OR - Two (2) Fingerprint Cards

If you reside in California, you must complete the electronic Live Scan fingerprint process. You will need to download the Request for Live Scan Service form from the Board’s website. You may mail or upload a copy of the completed form with your application.

If you reside outside of California, you must submit two completed fingerprint cards or have your electronic fingerprints completed at a California Live Scan facility. The Board will mail your fingerprint cards once the Board receives your application and appropriate processing fees. You must complete all personal data on the fingerprint cards or the Board will return the cards to you for completion.

The Board must receive the Criminal Records Check from both the California Department of Justice and the Federal Bureau of Investigation prior to the issuance of your PTL.
## Examination Documentation

- **ECFMG Certification Status Report:** *(International Medical School Graduates Only)*
  - A Certification Status Report from the ECFMG is required to verify the certification is valid. To obtain further information, visit ECFMG’s website at [http://www.ecfmg.org/](http://www.ecfmg.org/). **The Board will only accept an electronic submission of the Certification Status Report directly from ECFMG.**

- **Official Examination Scores from the appropriate examination entity:**
  - USMLE or LMCC
  - Official examination history reports must be requested from the appropriate examination agency’s website listed below:
    - **USMLE** - [www.fsmb.org/transcripts/](http://www.fsmb.org/transcripts/)
    - **LMCC** - [www.mcc.ca/](http://www.mcc.ca/)
  
  **The Board will only accept an electronic submission of the official examination history verifying passage of steps 1 and 2CK of the USMLE or Part I of the LMCC.**

## Medical Education Documentation

- **Certificate of Medical Education, Form MED**
  - A Certificate of Medical Education (Form MED) is required from each medical school attended. Complete the applicant information at the top of the form and mail it to the medical school. A medical school official must complete, sign and date Form MED, and affix the official medical school seal. **Form MED submitted through the Board’s DOCS portal does not require a medical school seal.** Any fields or questions left unanswered will require completion of a new form. **The medical school must submit the completed form through the Board’s DOCS portal or by mail to be acceptable.**

- **Official Medical School Transcript**
  - An official medical school transcript and translation (if not in English), prepared on university letterhead affixed with the signature of the dean or registrar and the medical school seal, documenting all of the basic science and clinical courses completed during the medical curriculum is required. **A transcript is required from each medical school attended.** **The medical school must submit the transcript through the Board’s DOCS portal, an approved online service(s), or by mail to be acceptable.**

- **Certified Copy of Medical School Diploma**
  - A certified copy of the medical school diploma and translation (if not in English) is required. The certified copy must have the original signature of the dean or registrar of the medical school, be affixed with the official medical school seal, and include a statement attesting that the copy is a true and correct copy of the original. **The medical school must submit the certified copy of the diploma through the Board’s DOCS portal or by mail to be acceptable. However, if applicable, the applicant may submit an approved electronic diploma to the Board.**

- **Certified English Translations (if applicable)**
  - Certified English translations are required for all academic documents that are not prepared in the English language. Refer to the Translation of International Academic Credentials information sheet on the Board’s website for details regarding acceptable English translations. **The translator/agency must mail the official certified translation directly to the Board or the medical school must submit the certified translation through the Board’s DOCS portal or by mail to be acceptable.**
### APPLICATION CHECKLIST (Continued)

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<thead>
<tr>
<th>Postgraduate Training Documentation</th>
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<tr>
<td><strong>Certificate of Completion of ACGME/RCPSC/CFPC Postgraduate Training, Form PTA-PTB (If applicable)</strong></td>
</tr>
<tr>
<td>This form is only necessary if you attended a Board-approved postgraduate training program prior to your enrollment in a California ACGME-accredited postgraduate training program. A Certificate of Completion of ACGME/RCPSC/CFPC Postgraduate Training, Form PTA-PTB is required to verify the number of months of credit received for Board-approved postgraduate training. You must submit a form to each postgraduate training program attended for completion. Each program you attended must submit a PTA-PTB form to verify training.</td>
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<td>The current program director or the designated institutional official (DIO) must provide all required information and responses on the form, sign and date the form, and affix the program seal. If a program seal is not available, the program director or the DIO must sign in the presence of a notary and the notary seal must be affixed. If the program submits the completed form and/or letter of explanation through the Board’s DOCS portal, a program seal or notary are not required.</td>
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<tr>
<td>A &quot;yes&quot; response to any of the questions on Form PTA requires a signed and dated letter of explanation, on facility letterhead, from the current program director or DIO.</td>
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<tr>
<td>The program must submit the completed Form PTA-PTB and/or letter through the Board’s DOCS portal or by mail to be acceptable.</td>
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| **Postgraduate Training License Enrollment Form, Form EF** |
| Proof of enrollment in a California ACGME-accredited postgraduate training program is required. Complete the applicant information and submit the form to the current training program for completion. |
| The current program director or the DIO must provide all required information and responses on the form, sign and date the form, and affix with the program seal. If a program seal is not available, the program director or the DIO must sign in the presence of a notary and the notary seal must be affixed. If the program submits the completed form through the Board’s DOCS portal, then a program seal or notary is not required. |
| The program must submit the completed Form EF through the Board’s DOCS portal if the resident has an open application with the Board or by mail to be acceptable. |

| **License Verification (If applicable)** |
| License verification is required from each U.S. state, U.S. territory, or Canadian province in which an applicant holds or has held a license to practice medicine, including temporary, training, or provisional license(s). The licensing authority must be submit the official license verification directly to the Board to be acceptable. |
APPLICATION CHECKLIST (Continued)

Other Items

☐ Explanation For Application Question, Form EXP
   (If applicable)
   You may use this form to provide a detailed written explanation for a “yes” response to a question on the Board’s application. A separate Form EXP is required for each question.

☐ Timeline of Activities, Form TOA
   (If applicable)
   Provide the Board with a written chronological description of all professional and non-professional activities, from the date of graduation, with no gaps.
   If you have completed any externships, observerships, or volunteer activities in California, please include a detailed description of the duties and responsibilities along with the location and name of the supervising physician.
   Submit the signed and dated Timeline of Activities form directly to the Board.

NOTE

▷ If the resident moves, transfers to another program, is terminated, resigns, or takes a leave of absence resulting in a change to the PTL expiration date, the program director or the DIO must submit a Program Status Update/Change Form directly to the Board within 30 days of the change of status.