Rev. 01/25

INSTRUCTIONS FOR COMPLETING AN APPLICATION TO PRACTICE AS A GENETIC COUNSELOR IN VIRGINIA

(This form has been designed to be used as a checklist when preparing to submit your application.)

APPLICATION FEES ARE NONREFUNDABLE

BEFORE YOU PROCEED, READ THE FOLLOWING POINTS CAREFULLY!

NOTE

AN APPLICATION THAT IS NOT COMPLETE EXPIRES 180 DAYS AFTER IT IS SUBMITTED TO THE BOARD. IT IS THE RESPONSIBILITY OF THE APPLICANT TO ENSURE THAT ALL NECESSARY SUPPORTING DOCUMENTS ARRIVE AT THE BOARD PRIOR TO THE EXPIRATION DATE. IF THE ORIGINAL APPLICATION EXPIRES, THE APPLICANT MUST SUBMIT ANOTHER APPLICATION, PAY THE APPLICATION FEE AGAIN AND ENSURE THAT NEW SUPPORTING DOCUMENTS ALSO GET TO THE BOARD.

This is the application for a full and unrestricted license to practice Genetic Counseling in Virginia.

You should familiarize yourself with the qualifications required for a full license by reviewing the laws and regulations governing the practice of genetic counseling in Virginia. They can be found at: https://www.dhp.virginia.gov/Boards/Medicine/PractitionerResources/LawsRegulations/

The Board works as efficiently as possible to process applications. The time from filing an application with the Board until the issuance of a license is dependent upon entities over which the Board has no control. It is the applicant's responsibility to ensure that outside entities send the necessary documentation to the Board. You should not expect the process to take less than 2-3 months, so plan accordingly if you are pursuing a practice position in Virginia.

NB: Virginia law considers material misrepresentation of fact in an application for licensure to be a Class 1 misdemeanor. Misrepresentation may be by commission or omission. Be sure of your facts and provide full responses to the Board's questions.

A completed application must be submitted along with the fee of \$130.00. Applications and fees must be received together.

Certain forms may be faxed to 804-527-4426. The phone number to the Virginia Board of Medicine is 804-367-4600. The Board's email address is <u>medbd@dhp.virginia.gov</u>

Mailing Address

Virginia Board of Medicine 9960 Mayland Drive, Suite 300 Henrico, VA 23233-1463

PROCEEDING TO THE APPLICATION SIGNIFIES THAT YOU HAVE READ AND ACCEPT THE FOREGOING PRINCIPLES REGARDING THE BOARD'S PROCESSES

- 1. Application and Fee Complete the online application which includes paying the non-refundable fee of \$130. Application fees may only be paid using Visa, MasterCard, American Express or Discover. Applications submitted without an application fee will not be processed.
- 2. **Transcript** An applicant for a license to practice genetic counseling shall request original source documentation (not a copy) of the following to be provided to the Board:
 - School transcripts documenting completion of a master's degree from a genetic counseling training program that is accredited by the Accreditation Council of Genetic Counseling. Transcripts must be official and bear the school seal. Transcripts will only be accepted if they come directly from the school to the Board or if sent to the Board by the applicant in the same unopened envelope in which they were received. Official school transcript can be emailed directly by the school to GC-Medbd@dhp.virginia.gov.
- □3. ABGC or ABMG Certification Contact the ABGC or ABMG to have a verification of your certification electronically sent to the Board at <u>GC-Medbd@dhp.virginia.gov</u>. You may also mail a notarized copy of a current, valid certificate issued by the ABGC or ABMG to practice genetic counseling. <u>Note</u>: If mailing this doc ument, you will need to sign the copy of the document in front of the notary attesting to its authenticity and the notary will verify that it is you attesting to the document.
- 4. Provide a copy of documentation supporting any name change.
- 5. If you answer "yes" to any question #6-18, provide supporting documentation to the Board, along with a narrative explaining your answer. Please provide court documentation for any convictions.

Items 6-8 are not required if you have never practiced your profession <u>and</u> you have never held licensure in another jurisdiction.

6. **Employment Activity** – List all activities from the date of graduation from your professional school including but not limited to internships, employment, affiliations, periods of non-activity or unemployment, observerships, and volunteer service in the "Employment Activity" section of the application. Begin with your first activity following professional school graduation. If you are employed by a group practice or locum tenens/traveler company, please list all locations where you have provided service or held privileges. If you need additional space to record your activities, follow this link to obtain a supplemental form and submit with your application:

Supplemental Form: https://www.dhp.virginia.gov/media/dhpweb/docs/med/forms/SupplementalForm.pdf

For applicants practicing as travelers or locum tenens, or if you are practicing telemedicine, have the company you are affiliated with provide a complete list of all locations and dates where you have provided service.

7. Verification of Licensure - Primary source verification of your license from a jurisdiction within the United States, its territories and possessions or Canada in which you have been issued a full license must be received by the Board. Please contact the jurisdiction where you have been issued a license to practice genetic counseling to inquire about having documentation forwarded to the Virginia Board of Medicine. Verification must come directly from the jurisdiction and can be sent by email to <u>GC-Medbd@dhp.virginia.gov</u>, faxed to (804) 527-4426 or mailed.

NPDB Self Query - Complete the online <u>Place a Self-Query Order</u> form. Be ready to provide:
Identifying information such as name, date of birth, Social Security number
State health care license information (if you are licensed)
Credit or debit card information for the \$4.00 fee (charged for each copy you request)

Verify your identity. This can be done electronically as part of your order or by completing a paper form and having it notarized. You will receive full instructions as you complete your order.

Wait for your response. Once your identity is verified, the NPDB will process your order. A paper copy of your response will be sent the next business day by regular U.S. mail.

Please note that the Board will accept a digitally certified electronic copy of the NPDB report that is emailed to the Board, in lieu of a mailed report.

Should you choose to mail your report, when you receive your report in the mail from NPDB, DO NOT OPEN IT. Place your unopened NPDB report in an oversized envelope and forward it to the Virginia Board of Medicine. The Board recommends using Fed EX or UPS for tracking purposes.

The Board of Medicine is unable to track any mail or other package that is sent via the United States Postal Service. Any NPDB report received for an application not completed within 6 months of receipt of the NPDB report will have to be resubmitted.

PLEASE NOTE:

*Please be aware that consistent with Virginia law and the mission of the Department of Health Professions, public addresses on file with the Board of Medicine are made available to the public. The Board address noted on your application may be different from the public address and is not released to the public. This notice is to reiterate that the Board of Medicine will allow the Board address of record to be a Post Office Box or practice location.

*Applications will be acknowledged after receipt if items are missing.

*Applications not completed within 180 days may be purged without notice from the board.

*Additional information may be requested after review by Board representatives.

*Application fees are non-refundable.

* Do not begin practice until you have been notified of approval. Submission of an application does not guarantee a license. A review of your application could result in the finding that you may not be eligible pursuant to Virginia laws and regulations.

*Certain forms may be faxed to 804-527-4426.