



WYOMING BOARD OF MEDICINE

PHYSICIAN ASSISTANT APPLICATION INSTRUCTIONS

The paper application must be completed in its entirety. Please type or legibly print on any documents that you are required to mail to the Board or a third party. Incomplete or illegible documents will delay processing. The application fee must be paid cashiers check or money order. **FAXES WILL NOT BE ACCEPTED FOR ANY DOCUMENTS RELATED TO YOUR APPLICATION.**

1. **Print** the following documents:
 - a. Physician Assistant Paper Application
 - b. Physician Assistant Affidavit
 - c. Citizenship and Alien Status Declaration Form
 - d. Physician Assistant Education Verification Form
 - e. Physician Assistant Reference Questionnaire Instructions (print three (3) copies)
 - f. Physician Assistant Reference Questionnaire Form (print three (3) copies)
 - g. Physician Assistant License Verification Form (print enough copies to send to each medical board where you currently hold or have previously held a PA license)
 - h. Application form(s) from Wyoming licensed Supervising Physician(s)

2. **THE FOLLOWING DOCUMENTATION MUST BE REQUESTED DIRECTLY FROM THE APPROPRIATE SOURCE AND SUBMITTED DIRECTLY TO THE BOARD FROM THAT SOURCE. Faxes will not be accepted. We will **not** accept these documents from the applicant:**
 - a. Verification of graduation from a Physician Assistant training program accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) or its predecessor or successor organization.
 - b. Verification from every state and country in which the applicant is or has been licensed to practice as a physician assistant (attached).
 - c. Verification of certification from the National Commission on Certification of Physician Assistants.
 - d. Reference questionnaires must be completed on a form provided by the Board.
 - e. Two reference questionnaires must be from a physician, the remaining reference questionnaire may be from a physician or a physician assistant. At least one reference questionnaire shall be from your most recent supervising physician at your current or previous employment setting. If you are a recent graduate with no employment history, references may be from your instructors at your PA training program. **Letters from intended employers are NOT acceptable.**