

## **TRADITIONAL MIDWIFE**

### **Application Instructions and Requirements**

Please thoroughly review these materials before submitting your application. Any processing fees incurred are your responsibility. The Board reserves the right to reject any outdated applications submitted; therefore, it is recommended that you complete the application in a timely manner. Incomplete applicant files will be destroyed after six months of inactivity.

#### **Methods of Licensure**

The statute establishes eligibility for licensure by general or reciprocity, and applicants must select one on the application. All applicants must submit a completed application and appropriate fees online at [MN Health Board](#) or by paper to the Medical Board.

#### **General Licensure Requirements**

- Current certification of valid and current North American Registry of Midwives (NARM) credential as a certified professional midwife (also serves as documentation verifying the practical experience requirement and approved education program or internship). Obtain through NARM website.

#### **Licensure by Reciprocity Requirements**

- Current certification of valid and current North American Registry of Midwives (NARM) credential as a certified professional midwife (also serves as documentation verifying the practical experience requirement and approved education program or internship). Obtain through NARM website.
- Current and unrestricted license from another state which requires NARM accredited program and NARM certification as a certified professional midwife. Verification form included in application packet; will also accept other emailed or mailed verification directly from source (e.g. state board).

**The following requirements must be sent directly to the Minnesota Board from the facility/person completing the form:**

- **Direct verification of active/expired Licensure/Registration/Certification:** [The Verification of Licensure/Registration/Certification Form](#) or the verification of licensure letter can be sent from the state to the Medical Board by email or mail. Verification letters can also be requested through VeriDoc Inc. to the Medical Board. Go to <https://www.veridoc.org/> to have a verification letter sent from another participating state board to the Medical Board. If the state does not do verifications, please forward the email response from state stating they do not do verifications or email the link to the state website showing the verbiage the state does not do verifications to the Medical Board and attach the pdf verification from the state website. The Board must receive a separate verification form completed by each state board where you have ever held a healthcare professional license/registration/certification.

**In addition to the documentation requirements set forth under the general or reciprocity licensure requirements, all of the following requirements must be met:**

- Non-refundable \$232.00 fee paid online by credit/debit card or submit paper application with check, money order, or cashier's check payable to the **Minnesota Board of Medical Practice**. **Cash will not be accepted. Any cash received will be returned, and processing of your application may be delayed.**
- Copy of current certification from the American Heart Association or the American Red Cross for adult and infant cardiopulmonary resuscitation.
- [Medical Consultation Plan Form](#).
- The name on the application and the name on the NARM certificate must be the same. If there has been a name change, submit a copy of the supporting documentation, e.g., marriage license.
- [Affidavit of Applicant Form](#) A recent, full-face, 2" X 2" color photograph must be affixed as indicated on the form and notarized as a true likeness. Please ensure to fill in and sign all required areas of the form.
- Copy of driver's license or other government issued photo ID.
- Criminal Background Check: applicant will receive emailed instructions once the application is processed. **Use ORI number for Board of Medical Practice: MN920158Z on CBC forms.**
- Any other information requested by the Board.

**Application Fees**

Please be aware that all fees are non-refundable. Fees submitted will not be refunded if it is determined that you are not eligible for licensure.

**Applicants are required to submit written notification to the Board within 30 days of any name or address change. The law takes precedence over any conflicts between these instructions and the law.**