

MAILING ADDRESS: PO BOX 2649 Harrisburg, PA 17105-2649	PENNSYLVANIA STATE BOARD OF OSTEOPATHIC MEDICINE st-osteopathic@pa.gov (717) 783-4858	COURIER ADDRESS: 2601 North Third Street Harrisburg, PA 17110
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REQUEST FOR CERTIFICATION OF OMT OR STATE EXAM SCORES

<p>INSTRUCTIONS</p> <p>If you took FLEX or NBOME/COMLEX, you will need to obtain verification of your scores from the respective testing center. The Board cannot provide certification of these scores.</p> <p>To obtain a certification of your Pennsylvania OMT or state exam scores, you must complete this form and return it to the <u>mailing address</u> above along with a \$25 check/money order, payable to the "Commonwealth of PA." There is a \$20.00 charge for all checks returned "NOT PAID" regardless of the reason for non-payment. Due to a fire in June 1994, some exam scores cannot be verified. If your scores cannot be verified, the Board will provide a letter to this effect and will return your fee.</p>

LICENSEE INFORMATION

LICENSEE'S NAME:	Last:	First:	Middle:	Maiden:	
LICENSE #:	DATE OF BIRTH:		Month	Day	Year
SOCIAL SECURITY #:					
LICENSEE'S ADDRESS:					
City:		State:		Zip Code:	

MAILING INFORMATION

<p>PLEASE PROVIDE THE NAME AND ADDRESS WHERE THE COMPLETED CERTIFICATION SHOULD BE MAILED.</p> <p>PLEASE NOTE: Effective May 19, 2008, Certification will only be sent to another licensing board directly from our office.</p>		
LICENSING AUTHORITY NAME:		
STREET:		
CITY:	STATE:	ZIP CODE: