

BOARD OF OSTEOPATHIC LICENSURE
CHANGE OF ADDRESS FORM

It is the licensee's obligation, not that of the Board, to see that address information is current.

Pursuant to 32 MRS §2600-A. (confidentiality of personal information of applicant or licensee): An applicant or licensee shall provide the board with a current professional address and telephone number, which will be their public contact address, and a personal residence address and telephone number. An applicant's or licensee's personal residence address and telephone number is confidential information and may not be disclosed except as permitted by this section or as required by law, unless the personal residence address and telephone number have been provided as the public contact address. Personal health information submitted as part of any application is confidential information and may not be disclosed except as permitted by this section or as required by law. The personal health information and personal residence address and telephone number may be provided to other governmental licensing or disciplinary authorities or to any health care providers located within or outside this State that are concerned with granting, limiting or denying a physician's employment or privileges.

Please note: The information provided by you on this form will be used to update the information in our database which in turn goes to our website (city and zip only). The Board's web address is: www.maine.gov/osteo.

Address Change Effective Date: _____ Your License Number: _____

Name: _____
Last First MI

Signature (of Licensee): _____

Professional Address:

Former Public/Mailing Address: _____

City State Zip Code

New Public/Mailing Address: _____

City State Zip Code

Maine county my practice is located in: _____ Office Phone: _____

Residence Address (Personal):

Former Home/Other Address: _____

City State Zip Code

New Home/Other Address: _____

City State Zip Code

E-Mail Address(work and/or personal): _____ Home Phone: _____

This form may be e-mailed (susan.e.strout@maine.gov), faxed (207/287-3015) or mailed
(142 State House Station, Augusta, ME 04333-0142) to the Board office.