

**Application for a General Licence to Practise as a Medical Doctor**

**The application form needs to be filled out, printed and signed.**

**Handwritten applications will not be accepted.**

**Submitted documents must be in Icelandic, English or in a Nordic language (other than Finnish). If the original documents are in another language, they must be translated by a certified translator and certified copies of the original documents must accompany the application.**

The right to use the professional title medical doctor and to practise as such in Iceland is defined in regulation no. 467/2015 **on the education, rights and obligations of Medical Doctors and the criteria for being granted a Licence to Practise.** The regulation is issued in accordance with the Healthcare Practitioners Act no. 34/2012.

**Please fill in the following information**

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| **Applicant**  Name:       Icelandic ID No.:  Home address:       Postal code:       Town/City:       Country:  Phone number :       E-mail:      @  Citizenship: |

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| **Information about education**  Educational institution/degree from:  Beginning of studies: Mth/Year       /  End of studies: Mth/Year      / |

**Supporting documents**

Applicants with a degree from an **educational institution in Iceland** must submit:

☐ A certified copy of their degree certificate stating the name, ID number and title of degree of the applicant.

☐ A certified confirmation of the completion of a 12 month additional training programme.

Applicants who have **studied in an EEA country or Switzerland** must, **in addition to a certified copy of their degree certificate**, submit:

☐ A certified copy of a licence to practise in the country in question. Not available ☐

☐ A certified copy of a valid passport.

☐ A letter of good standing that confirms that there hasn´t been a revocation, restriction or suspension of a licence to practise or other such retributive measures resulting from professional violations or mistakes. The letter of good standing must not be older than three months.  
☐ A certificate from a competent authority in the country that issued evidence of the applicant’s formal education and competence which confirms that the applicant´s qualifications meet the criteria of Directive [2005/36/EC](https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32005L0036) of the European Parliament and of the Council on the recognition of professional qualifications, in accordance with Icelandic Regulation no. [510/2020](https://www.government.is/publications/legislation/$LisasticSearch/Search/?SearchQuery=&Ministries=Ministry+of+Health&Themes=&ContentTypes=) on the recognition of professional qualifications of healthcare practitioners from other EEA countries (letter of conformity). Sometimes the information under this and the preceding paragraph is contained in one document called **Certificate of Current Professional Status** (CCPS).

Applicants who have **studied in countries outside the EEA or Switzerland** must, in addition, submit:

☐ Certified copies of applications for work and residence permits in Iceland.

☐ A signed contract of employment in health care.

☐ A certificate confirming knowledge of the Icelandic language.

☐ A course syllabus, or a detailed description of the classes concerned, in Icelandic and English.

**The processing of an application can take up to two months after all documents have been received by the Directorate of Health.**

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| **Submitted documents**  Please register and number all submitted documents, with names and numbers of the documents, on a separate page.  Only applications that have registered and numbered documents will be accepted.  Please note that the documents should not be bound, stapled together or placed in a plastic pocket.  Numbers and names of submitted documents:  1.  2.  3. |

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Date and place Signature