NORTH CAROLINA BOARD OF NURSING

NURSE PRACTITIONER REGISTRATION ONLY APPLICATION

IDENTIFICATION DOCUMENT

Recent photograph of applicant: Please PASTE a passport type photograph of your face and shoulders below in the appropriate block. The photograph must be no older than 6 months and of a durable quality. Home Polaroid or computer-generated photographs are not acceptable.

PLEASE PASTE PHOTOGRAPH HERE

Home Polaroid or computer-generated photographs are **NOT** acceptable

This is a photograph taken of me within 6 months

_____
Signature of Nurse Practitioner application
(ORIGINAL SIGNATURE)

_____
Full Name Printed Legibly or Typed

_____
Date

Submit all materials to: NC Board of Nursing
Attn: Teresa Werlau
P. O. Box 2129
Raleigh, NC 27602

OR For Overnight Mail Service ONLY: NC Board of Nursing
Attn: Teresa Werlau
4516 Lake Boone Trail
Raleigh, NC 27607

THE APPLICATION IS NOT COMPLETE UNTIL ALL COMPONENTS ARE RECEIVED BY NC BOARD OF NURSING.