

NORTH CAROLINA BOARD OF NURSING

NURSE PRACTITIONER REGISTRATION ONLY APPLICATION

IDENTIFICATION DOCUMENT

Recent photograph of applicant: Please paste or tape a **passport type and size** 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. Computer copied or generated photographs are not acceptable.

PASTE OR TAPE CURRENT PHOTOGRAPH HERE
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This is a photograph taken of me within 6 months

Signature of Nurse Practitioner Applicant
(ORIGINAL SIGNATURE)

Full Name Typed or Printed Legibly

Date

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

OR

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

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