



# Determination Petition

Revised 07/2025

[ORS 670.280](#) and [OAR 847-007-0010](#) allow a person to petition the Board for a determination as to whether a criminal conviction will prevent the person from receiving a license issued by the Oregon Medical Board (OMB).

## Instructions:

1. Complete the form fully and accurately.
2. Attach any supporting documentation.
3. Mail or fax the documents and \$75 processing fee to the address/fax number on page two of this document.

## Petitioner Information

\_\_\_\_\_  
Last Name First Name Middle Name Date of Birth (mm/dd/yyyy)

\_\_\_\_\_  
Phone Email

\_\_\_\_\_  
Mailing Address Street City, State, Zip Code

Select which license you would apply for in the future: ☐ MD ☐ DO ☐ DPM ☐ PA ☐ LAc

## Criminal History Disclosure

*List each conviction separately with dates, locations, and case numbers if known. Explain underlying circumstances and resolutions of each matter. Include incidents from all jurisdictions (local, state, federal, military, etc.), do not omit any information based on assumptions about relevance.*

I certify the above information is true, accurate, and complete to the best of my knowledge. I understand the OMB's determination may be rescinded if I have criminal allegations or charges pending, if I have not disclosed all information, if I have been convicted of another crime prior to submission of a license application, or if there are other circumstances as described in [ORS 670.280](#) or [OAR 847-007-0010](#).

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Credit Card Payment

Note: All payment information is confidential, Oregon Medical Board use only.

**DO NOT E-MAIL CREDIT CARD PAYMENT FORM**

Company Name	\$ 75.00
Amount	
Printed Name as it Appears on Card	
Signature	Phone Number with Area Code
Mailing Address	City, State, Zip Code
Credit Card Number - VISA, MASTERCARD, OR DISCOVER	Expiration Date

Forms with credit card information may be faxed to 971-673-2670 or mailed to:

Oregon Medical Board  
1500 SW 1st Ave, Suite 620  
Portland, Oregon 97201

Credit card information may also be provided by calling 971-673-2700 and emailing the first page to:

[info@omb.oregon.gov](mailto:info@omb.oregon.gov).

**DO NOT EMAIL CREDIT CARD INFORMATION.**