

Resident Physician Limited License

This certifies the appointment of the following individual who is being recommended for a limited license in Washington State.

Name of Resident Physician* _____

Name of training program/specialty _____

Name of sponsoring institution _____

Beginning date _____
mm/dd/yyyy

Signature _____
Director of Program

Is this an ACGME Program? Yes No

* Resident physician means an individual who has graduated from a school of medicine which meets the requirements set forth in [RCW 18.71.055](#) and is serving a period of postgraduate clinical medical training sponsored by a college or university in this state or by a hospital accredited by this state. The term shall include individuals designated as intern or medical fellow.

Note: The issuance of a limited license does not allow the individual to engage in the practice of medicine outside the supervision of the postgraduate clinical medical training program.