



**ECFMG**™  
A Member of Intealth

# Notification of Certificate/Letter of Good Standing Request

**Instructions:** Once you have requested that the appropriate medical regulatory authority send a Certificate/Letter of Good Standing to ECFMG, please complete the information below and upload this form to your EPIC Portfolio as a Medical Registration/License to Practice Medicine. Once your Certificate/Letter of Good Standing is received and accepted by ECFMG, it will be added to your EPIC Portfolio. Please note that ECFMG will not request a Certificate/Letter of Good Standing from the authority in response to this form; that request must be made by you.

I, \_\_\_\_\_, \_\_\_\_\_ with EPIC ID \_\_\_\_\_  
*Last Name (Family Name, Surname) Rest of Name EPIC ID*

requested that \_\_\_\_\_  
*Name of Medical Regulatory Authority*

of \_\_\_\_\_ issue a Certificate/Letter of Good Standing  
*State/Province/Country*

to ECFMG. This request was made in support of my application to

\_\_\_\_\_  
*Name of Organization*