VERMONT DEPARTMENT OF MENTAL HEALTH
Commissioner Designation as a Physician/APRN Who Can Perform Emergency Examinations
APPLICATION

Provider Name: 
Provider License Number: 
Mailing Address: 
Telephone Number: 
Specialty: 
Board Certified: 
Expiration: 

Do you have any actions taken against you by the Vermont Board of Medical Practice/Office of Professional Regulation? (If yes, describe on a separate page.)

EMERGENCY EXAM TRAINING COMPLETION
☐ QMHP classroom training provided by Vermont Department of Mental Health
Location: 
Date Attended:

☐ Online training (A completed quiz must be attached to this application form.)
Date of Completion:

☐ Mock 1st Physician's Certification (Must be attached to this application form.)

I certify that the information provided is true and accurate. I agree to send the Vermont Department of Mental Health any changes to the above information as soon as possible. I acknowledge that as part of this designation the Department will check the Vermont Board of Medical Practice/Office of Professional Regulation’s website to confirm the information above.

Signature: ___________________________ Date: ___________________________

HOSPITAL/DA/DOC MEDICAL STAFF ENDORSEMENT

is in good standing at (hospital name, DA or DOC)
and has no disciplinary action(s) from the medical staff organization.

☐ This hospital/DA/DOC endorses this employee to perform emergency evaluations.

Chief of Medical Staff/DA Medical Director/Health Services Administrator
(please print):___________________________________________________________

Signature: ___________________________ Date: ___________________________

Instructions:
1. Please complete this application form after attending the QMHP classroom training or completing the online training module for Physicians/APRNs Conducting Emergency Exams on the Vermont Department of Mental Health’s website.
2. Attach quiz answers and mock 1st physician’s certification to your application for designation as a physician/APRN who can perform emergency exams.
3. Send to: DMH Commissioner’s Office, 280 State Drive, NOB 2 North, Waterbury, VT 05671-2010