How to Submit Common Permit Requests
Do not send these requests in a spreadsheet!!

*Expiration Date Extensions  *Program Changes within Same Institution  *Placing in Research Status

General Instructions:
For any of the requests covered here, send an email to pit.applications@tmb.state.tx.us with the details listed below.

The program director must be copied on the request. Please do not submit a spreadsheet for these requests.

Request for Permit Expiration Date Extension
Same program and must be requested before permit expires…

Include the following details in the email to pit.applications@tmb.state.tx.us:
- Name of permit holder (exactly as displayed on permit)
- Permit holder’s date of birth (mm/dd/yyyy)
- TMB ID#
- New program/expiration date (mm/dd/yyyy)
- Reasons for extension (Ex: make up time off)

Request for New Permit Due to Program Change
Same institution and must be requested before current permit expires…

Include the following details in the email to pit.applications@tmb.state.tx.us:
- Name of permit holder (exactly as displayed on permit)
- Permit holder’s date of birth (mm/dd/yyyy)
- TMB ID#
- Current program ID number
- New program ID number
- New program/permit begin date (mm/dd/yyyy)
- New program/permit end date (mm/dd/yyyy)
- Reasons for change (Ex: progression into a sub-specialty)

Note about Website Verification: The website verification system can only display the most current permit issued. A new permit may be issued prior to the begin date, and thus display, although the current permit is still in force. Feel free to verify current permit by phone or in writing.

Request to Place Permit in Research Status
Same institution and we must receive (a) request before research begins and (b) notice before research ends…

Include the following details in the email to pit.applications@tmb.state.tx.us:
- Name of permit holder (exactly as displayed on permit)
- Permit holder’s date of birth (mm/dd/yyyy)
- TMB ID#
- Current program ID number
- Research begin date (mm/dd/yyyy)
- Research end date (mm/dd/yyyy)
Authorization for TMB (Board) to correspond with programs

Note: Programs that certify that they are authorized by each applicant to allow TMB to correspond with the program about the contents of the applications (lacking letters, permits, etc.) rather than the applicant, must submit the following statement one time to the board, either by e-mail to pit.applications@tmb.state.tx.us or fax to 1-888-550-7516.

Please be aware that this statement will apply to all applicants in the specified program from that point forward. If you do not have this type of authorization on file for every applicant in the program and you submit this statement, your program might receive confidential information and you would be liable for the consequences. If you only occasionally receive such authorizations from applicants, do not submit this statement.

Also be aware that this is not an authorization to release information to any third party.

I, (insert name and title), certify that (insert program name and ID number) has authorizations on file from all applicants for Physician In Training permits to receive all correspondence from the Board intended for the applicant from this point forward. I understand that I must notify the board immediately if this authorization for any applicant ceases to exist.

Date: ______________________