

## Montana Board of Nursing

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## Licensing Requirements and Application Checklist Medication Aide I

## **License Requirements for Medication Aide I**

Below are the minimum requirements you must meet in order to be licensed in the state of Montana.

- 1. Application submitted at https://ebiz.mt.gov/pol/ for a Medication Aide I license
- 2. Completion of a board-approved Medication Aide I training program ARM <u>24.159.910</u>
- 3. Successful passage of the Medication Aide I Exam within 12 months of training
  - Limited to taking the test without passing three times. Must complete training again in order to take the test a fourth time ARM 24.159.910
- 4. Submission of fingerprints to the Montana Department of Justice for the purpose of a fingerprint-based background check <u>37-8-434</u>, MCA

## Checklist of Required Documents to Submit for Application for Medication Aide I

The following documents and additional forms are required <u>in addition</u> to the basic application submitted at <a href="https://ebiz.mt.gov/pol/">https://ebiz.mt.gov/pol/</a>. Some documents may be submitted directly by the applicant as part of the application. Others, such as transcripts, may need to be sent to the board directly from the source.

You can apply for a license online at <a href="https://ebiz.mt.gov/POL/">https://ebiz.mt.gov/POL/</a> .	
	\$25 application fee
The following fee(s) must be submitted with your application. Online applicants can pay using a credit card or e-check.	
Application Fee(s) for Medication Aide I	
	Fingerprint-Based Background Check Report from Montana Department of Justice Non-Criminal Notice of Applicants Rights form (this is automatically completed when you submit your application online)
	professional license of any type
	Official license verification from states and jurisdictions in which the applicant holds or has ever held a
	board at email address above)  Medication Aide I examination (within 12 months of training) with Headmaster – <a href="https://hdmaster.com/">https://hdmaster.com/</a>
	Proof of passage of Medication Aide I training (completion certificate to be sent directly from program to

You must include a valid e-mail address with your application. E-mail is the department's primary form of communication.

If you have any questions about the application process or the licensing requirements please contact the Department of Labor and Industry Professional Licensing Bureau using the contact information at the top of this checklist.