



International Membership Application American College of Osteopathic Surgeons

1680 Duke Street, Suite 500, Alexandria, VA 22314
(800) 888-1312 • www.facos.org

ELIGIBILITY REQUIREMENTS

- Applicants must have the ability to speak and write in the English language. The application form must be completed in English, and all correspondence is to be conducted in English.
- Applicant must know one Fellow or member of the College who can serve as a reference and complete a reference form that speaks of the applicant's qualifications as a surgeon
- Applicant must have been practicing surgery for three years or more since the completion of his or her formal training, (residency, fellowship training etc., do not count as practice time)
- Applicant must hold a full and unrestricted license to practice medicine in their home country with no reportable actions pending that could adversely affect the status of that licensure.
- Applicant must hold a current appointment on the surgical staff of a hospital with no reportable action pending that could adversely affect staff privileges at any hospital
- Applicant must practice as a general surgeon or as a surgical specialist within the scope of their specialty
- Applicants must agree to abide by the bylaws, rules, regulations, and [ethics of ACOS](#) and the [AOA Code of Ethics](#)
- Applicant must have credentials from at least one of the following:
 - An American Surgical Specialty Board which is a member of the ABMS
 - An appropriate national surgical board from the country where the applicant currently practices
- Applicant must practice ethically and be recognized in his/her community as surgeon.
- In addition, the applicant must submit the following documents, along with the completed application to membership@facos.org
 - Current CV, (in English), to include:
 - Name of medical school attended and date of graduation
 - A current medical license in the country where the applicant practices
 - Residency training
 - Number of years of post-graduate training
 - Present and past professional positions
 - Membership in professional societies
 - Certificates of medical school completion and Board certifications in the country where the applicant practices
 - Documentation of the completion of basic surgical training requirements as determined by his/her country
 - One professional reference, (name and contact information), from a College Fellow or member
 - A letter of good standing from the medical licensing board in his or her country, state, province or jurisdiction must be submitted as part of the application
 - Enrollment Fee
- **Additional Requirements:**
 - The applicant may acquaint themselves with the ACOS members via the following methods:
 - Attendance at a recent or past ACA or other in-person educational event such as the General Surgery Mid-Year Updates or the Urology mid-year meeting
 - A meeting with the section chair or his or her discipline
 - Reaching out to the CEO for networking and introduction opportunities.

- **Submission of an Educational Abstract:** By the applicant will take place at an event such as the ACA, General Surgery Mid-Year Updates or in the form of an educational webinar. This must be done prior to membership acceptance.
 - **Induction Ceremony:** All new international members are required to attend an annual meeting of the American College of Osteopathic Surgeons to participate in a membership induction ceremony at the ACOS Ceremonial Conclave within three years of submitting their application for membership. If the new active member fails to attend any of these three (3) annual meetings of the American College of Osteopathic Surgeons for induction, the membership will be discontinued, but may be reinstated by the Membership Committee at the request of the former member. Reinstatement is effective after the former member attends the next annual meeting and participates in the induction ceremony.
- Applicants must meet any other requirements as determined by the Board of Governors.
 - The application processes shall be approved by the Board of Governors.
 - International members may participate in committees and the ACA. Fellow status is required for international members to hold leadership positions in the ACOS.

Please type or print legibly

Name			
	First	Middle	Last
	Nickname		
Mailing Address ☐ Home ☐ Work	Street Address		
	City		
	State		
Work Telephone	Home Telephone		Zip
Mobile Telephone	Fax Number		

E-mail Address		Government Issued Social Insurance Number	
Gender	☐ Male ☐ Female	Date of Birth	

CURRENT LICENSURE - List Country/State/Province/Jurisdiction in which you presently hold a license to practice surgery and your license number.

Country/State Province/Jurisdiction	License #	Country/State Province/Jurisdiction	License #
1)		2)	

CERTIFICATION

Name of Certifying Board	Specialty	Date

SPECIALTY DESIGNATION - ★ The primary specialty designation is used to determine proportional specialty representation on the Board of Governors. Please select one of the following: cardiothoracic; vascular; facial plastic; general surgery; neurological; obstetrics gynecologic; ophthalmologic; orthopedic; otolaryngology; plastic reconstructive; urological surgery.

★ Primary	Secondary	Tertiary

RESIDENCY TRAINING - If you had residency training, please attach copy of the certificate of completion.

Institution	Dates Attended	Specialty Type

INTERNSHIP TRAINING

Institution	Dates

CODE OF ETHICS – ACOS Members must abide by the [ACOS Code of Ethics](#). To assist us in upholding these standards, please answer the following questions. *If you answered yes to any of these questions, please attach an explanation.*

1. Has your request for any type of medical staff privileges ever been denied?	☐ Yes	☐ No
2. Have your medical staff privileges ever been reduced, confined, suspended, or terminated?	☐ Yes	☐ No
3. Has your license to practice ever been limited, suspended, or revoked?	☐ Yes	☐ No
4. Have you ever been convicted of fraud or a felony offense?	☐ Yes	☐ No
5. Has a hospital ever requested that you resign your medical staff privileges?	☐ Yes	☐ No
6. Are there any actions pending against you that would adversely affect your hospital privileges or medical staff status or state or local license?	☐ Yes	☐ No

MEMBER RECRUITER

The ACOS member who introduced me to the ACOS and encouraged my application _____
(Please Print Name)

RELEASE AUTHORIZATION

In furtherance of my application for membership in the American College of Osteopathic Surgeons (ACOS), I request and authorize any hospital and/or medical staff where I now have, have had, or have applied for medical staff privileges, and any organization of which I am a member or to which I have applied for membership, and any person who may have information, records, or documents which are deemed necessary by the ACOS to evaluate my eligibility for membership to provide such information to representatives of the ACOS. I agree that communications of any nature made to the ACOS regarding my qualifications for membership may be made in confidence and shall not be made available to me under any circumstances.

I release any hospital, medical staff, organization, or person, and the ACOS and its representatives from any liability for acts performed or communications, reports, recommendations, or disclosures made, requested, or received in good faith and without malice in connection with provision, collection, or evaluation of information or opinions bearing on my professional qualifications, credentials, clinical competence, character, mental or emotional stability, ethics, behavior, or any other matter, whether or not requested, in connection with my membership in the ACOS.

I pledge to hold the ACOS and its representatives harmless and agree to pay any attorney's fees and defense costs incurred by the ACOS for defending a lawsuit for damages or declaratory or other equitable relief in connection with the ACOS application.

I certify that the statements made by me in this application are true to the best of my knowledge and belief; and that I shall give every possible aid to the ACOS in its investigation of my qualifications as a surgeon.

I declare that I have read the Code of Ethics of the American Osteopathic Association.

I pledge that, if I become a member of the ACOS, I shall continue to abide by and uphold the Bylaws of the ACOS and the Code of Ethics of the American Osteopathic Association as interpreted by the ACOS.

I further pledge that, if honored by membership into the ACOS, any violation of ethical conduct on my part relating to hospital procedures or surgical practice shall be deemed cause for suspension or revocation of my membership in the ACOS.

 Signed	Date
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Submit your completed application and required documents along with a current curriculum vitae to membership@facos.org.

Click on the following links to access a copy of the [ACOS Bylaws](#) or [Code of Ethics](#)



AMERICAN
COLLEGE OF
OSTEOPATHIC
SURGEONS

ACOS MEMBER APPLICATION INFORMATION

Membership Approval Process

Allow up to 45 days for application processing. All newly elected members are required to participate in a membership induction ceremony (held at the Annual Clinical Assembly of Osteopathic Surgeons) within three years following election to membership.

DUES Membership Year 2026-2027

International Member	\$800.00 + One-time Application Fee \$200.00	per year
New Member	\$311.00	for the first year of membership. This one-time only membership is intended for early career physicians, (who have just completed their residency, or are in their first, second or third year of practice), transitioning to full members.
Dual New Member	\$143.00	for the first year of membership for new members who are also current members of the American Osteopathic Academy of Orthopedics, the American College of Osteopathic Obstetricians and Gynecologists, or the American Osteopathic Colleges of Ophthalmology and Otolaryngology, Head and Neck Surgery.
Member	\$627.00	per year after the first year of membership.
Member Not Practicing	\$525.00	per year for members who are employed full-time in a health care related profession (i.e., directors of medical education, hospital administrators, and managers of managed care networks) and who are not eligible for the Life Member categories.
Dual Member	\$316.00	per year after the first year of membership for members who are also current members of the American Osteopathic Academy of Orthopedics, the American College of Osteopathic Obstetricians and Gynecologists, or the American Osteopathic Colleges of Ophthalmology and Otolaryngology, Head and Neck Surgery.
U.S. Military / Public Health Service Member	\$393.00	per year during the enlistment period in the U.S. Military or Public Health Service.

American College of Osteopathic Surgeons

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Alexandria, VA 22314

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Fax: (703) 684-328

For additional membership information, access the member services page on the ACOS website at

 www.facos.org.