



Louisiana Board of Pharmacy

3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700
Telephone 225.925.6496 ~ Facsimile 225.925.6499
www.pharmacy.la.gov ~ E-mail: info@pharmacy.la.gov



Application for New Louisiana Pharmacy Technician Certificate

NOTE: If you have not yet obtained a Pharmacy Technician Candidate (PTC) Registration, this is the incorrect application form. To obtain the correct form, access the Board's website at www.pharmacy.la.gov, at the *Forms & Applications* link, then select *Form No. 30 ~ Application for New Pharmacy Technician Candidate Registration*.

Qualifications for Pharmacy Technician Certificate:

- 1) The applicant shall demonstrate one of the following educational competencies:
 - a. For those applicants who obtained their Pharmacy Technician Candidate (PTC) registration via Option A [proof of enrollment in a nationally-accredited and board-approved pharmacy technician training program], the applicant shall provide proof of successful completion of a nationally-accredited and board-approved pharmacy technician training program, using the document furnished by the training program.
 - b. For those applicants who obtained their PTC registration via Options B or C, or via any other method, the applicant shall provide proof of at least 600 hours of practical experience earned within a Louisiana-licensed pharmacy, using a properly completed pharmacist's certification form [*Form 31 – Pharmacist's Certification of Hours of Practical Experience Earned by Pharmacy Technician Candidates*].
- 2) The applicant shall demonstrate successful completion of one of the following board-approved pharmacy technician certification examinations:
 - a. Pharmacy Technician Certification Board (PTCB), reflecting original certification on or after January 1, 2000.
 - b. National Healthcareer Association (NHA), reflecting original certification on or after January 1, 2018.
The Board will accept a legible copy of the certificate issued by PTCB or NHA, or in the alternative, a screen print of the website verification thereof.
- 3) The application fee is \$100.00. The Board can accept a check or money order drawn on any bank located within the United States payable in US dollars to the Louisiana Board of Pharmacy.
- 4) This application shall expire one year after the date of its receipt in the Board office. In the event the application expires before the certificate is issued, the application shall be rendered null and void, and all fees attached shall be forfeited. Continued progress shall require a new application form and fee.

Application Process:

- We encourage you to complete the application form's fillable fields electronically and then print the form on regular copy paper. Forms printed on colored paper may be rejected. Remember to sign the application form and attach the photograph and required documents. Please review your application package before sending it to the Board office. The most common reasons for delayed processing are incomplete forms and missing documentation.
- We recommend you retain at least one copy of the package before placing original documents in the mail.
- If it is important to you to know whether or not the Board has received your application package – or when it was received, we recommend the mail tracing service (US Postal Service, FedEx, UPS, etc.) of your choice. Due to the volume of applications we receive, we are unable to respond to requests to verify receipt.
- As part of the licensing process, we are required to submit your name and identification information to the (1) Louisiana Office of Student Financial Assistance [LOSFA] to verify you are not in default of any student loans, and (2) the La. Dept. of Social Services [DSS] to verify you are not in default of any court-ordered support payments. We are required to wait for their responses before we can issue (or renew) your certificate. In the event we receive instructions to hold your application, we will contact you with that information and instructions to contact the appropriate agency.
- The initial pharmacy technician certificate shall expire on June 30 regardless of the date issued. In the event you are contemplating the submission of your application during the months of May or June, you have the option of requesting the delayed issuance of your certificate on the first business day of July. If not, you will be responsible for the immediate renewal of your certificate prior to June 30.

Maintaining your Louisiana Pharmacy Technician Certificate:

- The price of the privilege: it is your personal responsibility to learn the laws and rules governing pharmacy technicians and their professional practice. All of the Board's laws and rules can be found in the *Louisiana Pharmacy Law Book* which is available on the Board's website, at www.pharmacy.la.gov.
- Your failure to abide by these laws and rules, or your failure to practice in a professional manner, could result in disciplinary action by the Board. There are a range of potential sanctions available to the Board: they may issue a Letter of Warning or a Letter of Reprimand, they may place your certificate on probation or suspension, or they may revoke your certificate. In addition, they may levy a fine (any amount up to \$5,000.00 per count per day) and they may recover their costs of investigation and prosecution.
- Renewal of Technician Certificates:
 - Every pharmacy technician certificate expires on June 30 of every year; you may not practice with an expired certificate.
 - The renewal cycle is open from May 1 through June 30. You may renew your certificate online and pay with a credit card, or you may retrieve a renewal application form at the Board's website and pay with a check or money order.
 - The fee for the timely renewal (prior to the expiration date) of a certificate is \$50.00. The fee for the renewal of an expired certificate less than 30 days after the expiration date is \$75.00. The fee for the reinstatement of an expired certificate more than 30 days after the expiration date is \$275.00.
 - It is not required that you be in active practice or living within the state in order to renew your certificate. In the event you choose to let your certificate expire because you are not working in a pharmacy, please be aware of the penalty and reinstatement fees.
- Continuing Pharmacy Education (CPE):
 - One of the certificate renewal requirements is the acquisition of continuing pharmacy education (CPE). In order to renew, you must demonstrate the acquisition of at least 10 hours of ACPE-accredited technician-specific CPE in the prior 12-month period.
 - For your first renewal *only*, you are exempt from the requirement to demonstrate your compliance to the Board. For every renewal thereafter, you must demonstrate compliance with the CPE requirements. Your failure to do so will subject your technician certificate to disciplinary action by the Board.
 - In order to register for CPE activity sponsored by an ACPE-accredited CPE provider, you will need to apply for an eProfile number, which is issued by the National Association of Boards of Pharmacy (NABP). There is no cost to obtain that number, and once issued it is your number for your entire professional career. To obtain your eProfile number, select the CPE Monitor link at the NABP website at www.nabp.pharmacy. As part of the registration process at CPE Monitor, you must provide your Louisiana pharmacy technician certificate number.
 - When a pharmacy technician successfully completes a CPE activity, the CPE provider will send the relevant information electronically to CPE Monitor, which will maintain a comprehensive list of the CPE activities for the technician. You may review your account at CPE Monitor and print certificates for individual CPE events as well as transcripts showing all of your CPE activities. CPE Monitor is a free service provided by NABP.
 - The Board does not require a pharmacy technician to maintain the certification issued by PTCB or NHA because the Board has its own CPE requirements. If the pharmacy technician wishes to maintain their certification from PTCB or NHA (some employers may require it), they should comply with the requirements issued by those organizations. While certificates reflecting ACPE-accredited technician-specific CPE may be valid for both certification and licensure, the certification is not a substitute for compliance with the Board's CPE rules. Please note that a PTCB or NHA certificate is not a license and is not valid for practice in Louisiana.
- Please remember your obligation to give the Board written notice no later than 10 days after the following events:
 - A change in your mailing address. The notice shall include your name and certificate number, as well as both old and new addresses.
 - A change in the location of your employment as a pharmacy technician. The notice shall include your name and certificate number, as well as the name and permit number of the previous and new pharmacy locations.

Form No. 90 – Notice of Change in Mailing Address or Employment is available on the Board's website and includes fillable fields for all required information. You may send the completed form to the Board office by email, fax, or mail.



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Note: This application form shall be valid for up to one year after the date of its receipt in the Board office. In the event the certificate is not issued by that date, the application shall become null and void and any fees attached hereto shall be forfeited. The application fee for this certificate is **\$100**. We accept checks or money orders drawn on any bank located within the U.S. that are payable in US dollars to the Louisiana Board of Pharmacy.

Section 1 – Personal Information

Current Legal Name: _____
First Name Middle Name(s) Last Name Suffix (Jr., Sr. III, IV, etc.)

List All Other Names (Maiden, Married, etc.): _____

Note: Your current legal name will be your original licensure name. Once licensed, your original licensure name will not be changed for any reason. Subsequent name changes will be reflected on annual license renewals.

Section 2 – Contact Information

Mailing Address: _____

City, State, ZIP: _____

E-mail Address: _____

Telephone Numbers (with A/C): _____
Home Mobile

Section 3 – Pharmacy Technician Candidate Registration

Record the number of your Louisiana PTC Registration and its expiration date:

PTC: _____ Expiration Date: _____

Section 4 – Pharmacy Technician Certification Examination

Record the certification number from your PTCB or NHA certificate, as well as the date of initial certification. The PTCB certificate must be dated on or after January 1, 2000. The NHA certificate must be dated on or after January 1, 2018.

Number: _____ Date of Initial Certification: _____

For Board Use Only:

Check No.: _____ Amount: _____

Approved by: _____ Certificate No.: _____

Issued: _____

Section 7 – Photographic Identification

- Attach a recent photograph in the block at right, using one staple at the top and one at the bottom. Do not use glue or tape.
- Photograph should be recent (within last six months).
- Photograph must show a clear likeness of the applicant's head and shoulders, with eyes open.
- Photographs reproduced on a black/white copy machine are not acceptable.
- Do not use a photograph removed from an identification or similar card.

Staple one recent
passport size (2"x2")
fade-proof
photograph
in this block using the
guidelines at the left.

Date of Photograph: _____

Section 8 – Required Attachments

Please verify the presence of the required attachments:

- Yes No Legal documentation of all name changes beyond name recorded on birth certificate (see application notes).
- Yes No Copy of examination certificate identified in Section 4.
- Yes No Copy [or website verification thereof] of other pharmacy credentials identified in Section 5.
- Yes No Documents as needed from Section 6.
- Yes No Form No. 31 – Pharmacist's Certification of Hours of Practical Experience Earned by Pharmacy Technician Candidate

Section 9 – Applicant's Attestation & Signature

By my signature below, I agree with and attest to the following statements:

- I am the person referred to in this application, and the photograph above is a true likeness of me.
- With an awareness of the penalties of perjury, I affirm that all of the information I have provided in this application and all of its attachments is true and correct in every respect.
- I submit this application and all of its attachments for the purpose of obtaining a Louisiana pharmacy technician certificate, in order to engage in the practice of pharmacy in the state of Louisiana as authorized by the Louisiana Pharmacy Practice Act.
- I understand that furnishing false information or omitting required information in this application and all of its attachments may result in the denial of my application and the Board's refusal to issue the certificate – or if the certificate has already been issued, then the suspension or revocation of that certificate.

Date

Signature of Applicant