



Louisiana Board of Pharmacy

3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700
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Notice of Pharmacy Employment

The Louisiana Pharmacy Practice Act as well as the Board's rules requires all pharmacists, pharmacy interns, pharmacy technicians, and pharmacy technician candidates to notify the Board office within 10 days of any change in pharmacy employment sites. For those persons who practice in more than one pharmacy practice site, the Board has interpreted the law and rule to require the reporting of only one such site, and it should be the primary site or 'home' store. For those who wish to report multiple practice sites, our licensure information system can accommodate up to five permitted practice sites.

Please complete the form online before printing, then sign and date the bottom of the form before sending it. You may scan or mail the form (see addresses above) to our office. We encourage you to retain a copy for your personal records.

Name: _____

Credential No.: _____ Type: Pharmacist Intern Technician Candidate

Check One	Pharmacy Permit No.	Pharmacy Name & Address	Dates of employment (MM/DD/YYYY)
<input type="checkbox"/> Add <input type="checkbox"/> Remove	PHY. _____	Name: _____ Address: _____ City: _____ State: _____ Zip: _____	Start: _____ End: _____
<input type="checkbox"/> Add <input type="checkbox"/> Remove	PHY. _____	Name: _____ Address: _____ City: _____ State: _____ Zip: _____	Start: _____ End: _____
<input type="checkbox"/> Add <input type="checkbox"/> Remove	PHY. _____	Name: _____ Address: _____ City: _____ State: _____ Zip: _____	Start: _____ End: _____
<input type="checkbox"/> Add <input type="checkbox"/> Remove	PHY. _____	Name: _____ Address: _____ City: _____ State: _____ Zip: _____	Start: _____ End: _____
<input type="checkbox"/> Add <input type="checkbox"/> Remove	PHY. _____	Name: _____ Address: _____ City: _____ State: _____ Zip: _____	Start: _____ End: _____

Signature: _____

Date: _____