



Louisiana Board of Pharmacy

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PHARMACIST'S AFFIDAVIT FOR CERTIFYING HOURS EARNED BY PHARMACY INTERNS WITHIN LOUISIANA

INSTRUCTIONS FOR DOCUMENTING YOUR HOURS ON A PHARMACIST'S AFFIDAVIT:

- All hours of experience you earn in a pharmacy must be documented on a form provided by the Board. This form is called a Pharmacist's Affidavit. Please read it carefully before you begin completing it. If your Pharmacist's Affidavit is not completed properly, Board staff is obligated to void your document and request a replacement from you.
- The Pharmacist's Affidavit may only be executed by a pharmacist licensed in the state of Louisiana.
- It is strongly suggested that you record the hours you earn *as you earn them*.
- Upon completion of all hours, your Pharmacist's Affidavit should be signed and notarized by both you and the pharmacist. Please make a copy for your files before submitting the original document to the Louisiana Board of Pharmacy.
- Hours recorded in a pharmacy whose permit is on probation, or under the supervision of a pharmacist whose license is on probation, are not valid for licensure and will not be credited.
- Do not add or make any other corrections after the Pharmacist's Affidavit has been notarized. Hours recorded after the document has been notarized will be voided and denied.

INSTRUCTIONS FOR COMPLETING THE PHARMACIST'S AFFIDAVIT:

- 1) Read all statements on page one before you begin completing it.
- 2) Section 1 is to be completed and notarized by the pharmacist.
- 3) Section 2 is to be completed and notarized by the applicant.
- 4) Make sure all blanks have an entry.
- 5) Page 2 of the affidavit may be photocopied as needed.
- 6) A separate Pharmacist's Affidavit is required for each pharmacy where hours were earned.
- 7) Make sure your dates do not overlap from one week to the next.
- 8) Record **partial** hours as follows:

15 minutes = .25 30 minutes = .50 45 minutes = .75

Sample of a **Correct** Entry:

WEEK BEGINNING: MM <u>02</u> DD <u>02</u> YYYY <u>2003</u>				WEEK ENDING: MM <u>02</u> DD <u>08</u> YYYY <u>2003</u>				Total Hours Earned This Week Only
	SUN	MON	TUE	WED	THU	FRI	SAT	
ENTER DATE HOURS WORKED HERE →	2/2	2/3	2/4	2/5	2/6	2/7	2/8	
ENTER NUMBER OF HOURS EARNED HERE →		8	4.5	5	3		7.25	<u>27.75</u>

Sample of an **Incorrect** Entry:

WEEK BEGINNING: MM <u>02</u> DD <u>03</u> YYYY <u>2003</u>				WEEK ENDING: MM <u>02</u> DD <u>09</u> YYYY <u>2003</u>				Total Hours Earned This Week Only
	SUN	MON	TUE	WED	THU	FRI	SAT	
ENTER DATE HOURS WORKED HERE →	2/3	2/4	2/5	2/6	2/7	2/8	2/9	
ENTER NUMBER OF HOURS EARNED HERE →		8.05	4.20	5	3.15		7.25	<u>27.65</u>

Reasons these entries not correct: February 3rd is not a Sunday, February 4th is not a Monday, etc.
Partial hours not recorded properly

PHARMACIST'S AFFIDAVIT – Page 2 of 2

Full name of Applicant:	
Social Security Number:	
Name of Pharmacy Where Hours Earned:	

WEEK BEGINNING: MM ____ DD ____ YYYY ____	WEEK ENDING: MM ____ DD ____ YYYY ____
	SUN MON TUE WED THU FRI SAT
ENTER DATE HOURS WORKED HERE →	
ENTER NUMBER OF HOURS EARNED HERE →	Total Hours Earned This Week Only _____

WEEK BEGINNING: MM ____ DD ____ YYYY ____	WEEK ENDING: MM ____ DD ____ YYYY ____
	SUN MON TUE WED THU FRI SAT
ENTER DATE HOURS WORKED HERE →	
ENTER NUMBER OF HOURS EARNED HERE →	Total Hours Earned This Week Only _____

WEEK BEGINNING: MM ____ DD ____ YYYY ____	WEEK ENDING: MM ____ DD ____ YYYY ____
	SUN MON TUE WED THU FRI SAT
ENTER DATE HOURS WORKED HERE →	
ENTER NUMBER OF HOURS EARNED HERE →	Total Hours Earned This Week Only _____

WEEK BEGINNING: MM ____ DD ____ YYYY ____	WEEK ENDING: MM ____ DD ____ YYYY ____
	SUN MON TUE WED THU FRI SAT
ENTER DATE HOURS WORKED HERE →	
ENTER NUMBER OF HOURS EARNED HERE →	Total Hours Earned This Week Only _____

WEEK BEGINNING: MM ____ DD ____ YYYY ____	WEEK ENDING: MM ____ DD ____ YYYY ____
	SUN MON TUE WED THU FRI SAT
ENTER DATE HOURS WORKED HERE →	
ENTER NUMBER OF HOURS EARNED HERE →	Total Hours Earned This Week Only _____

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