



Pharmacy Intern U.S. Graduate - Checklist:



- I have submitted the Pharmacy Intern Application for U.S. Pharmacy Students/Graduates.**
Please make sure to include your Social Security Number (SSN) on your application. Your application will not be approved unless this information is included on your application.
- I have requested that my university complete the School Seal Form and return to the Board office.**
- I have submitted a license verification for all health-related licenses held in other states.**
Online license verifications will be deemed sufficient as long as they are current and display disciplinary history.

For applicants with health history:

- That section my application is complete and accurate.
- I have submitted a self-explanation of my health history.
- A letter, from a licensed professional, has been sent *directly* to the board, which summarizes my diagnosis, treatment, prognosis and identifies your ability to practice safely. (Must be current within the last year).

For applicants who hold, or who have held other *health-related* licenses which have been disciplined:

- That section of my application is complete and accurate.
- I have submitted a self-explanation of my disciplinary history.
- For each disciplinary action taken, I have submitted copies of the Administrative Complaint and Final Order.

For applicants with Criminal History:

- Those sections of my application are complete and accurate.
- I have submitted a self-explanation of my criminal history.
- For each conviction, I have submitted arrest records, final disposition(s), and documents showing successful completion of sentencing.

Before you submit...

- **Verify** your email address on the application. If you answered “YES” to “I want to be notified by email,” the Board office will communicate via email first.
- **Check** your application to ensure it is complete; answer all questions on the application truthfully and to the best of your ability.

After you submit...

You may check your application status, make changes to your application, and direct inquiries to the Board office:



www.floridaspharmacy.gov



MQA.Pharmacy@flhealth.gov



(850) 245-4474



Florida Board of Pharmacy
4052 Bald Cypress Way, Bin C-04
Tallahassee, FL 32399-3258

What is a(n)...?

License Verification: This is a specific document certifying licensure status and disciplinary history, prepared by a representative of the board which issued your license. Online license verifications will be deemed sufficient as long as they are current and display disciplinary history. *You may attach these to your application to expedite processing.*

Self-Explanation: Correspondence that describes the circumstances surrounding disciplinary action/health history/criminal history. Should your application require Board review, the Board will read your self-explanation. *You may attach this to your application to expedite processing.*

Administrative Complaint / Final Order: Disciplinary documents which show what violations occurred concerning a license, and what actions were taken against the license by the agency/board/department that issued the license. *You may attach these to your application to expedite processing.*

Arrest Records / Final Disposition: Documents that are usually held by the Clerk of Courts. These documents show what happened during an arrest, and what the outcome of court proceedings concerning that arrest were. *You may attach these to your application to expedite processing.*

Completion of Sentencing Documents: Documents showing successful completion of any sentencing imposed in a *Final Disposition*. *You may attach these to your application to expedite processing.*