



## Pharmacist by Endorsement U.S. Graduate - Checklist:



- I have paid the \$295.00 fee.**
  - *Applications submitted without fees will not be processed.*
  - *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 submitted the appropriate documentation based on my education.**
  - I have graduated with a Pharm. D. in the past 2 years and requested that my university complete Form A and return to the Board office.**
    - *Official transcripts sent directly from the university may also be accepted.*

OR

- I have graduated with a B.S. or Pharm. D. more than 2 years ago and requested the following:**
  - *Form A to be completed by my university and returned to the Board office, and*
  - *Form B to be completed by either the state board of pharmacy in the state you completed your internship or from your Employer. Form B must document the completion of 2080 internship or work experience hours. PLEASE BE ADVISED ALL INTERNS MUST HOLD A LICENSE OR PERMIT BY THE STATE IN WHICH THEY ARE PRACTICING IN ORDER TO COUNT THE HOURS AS INTERNSHIP HOURS.*
  - *If you are self-employed as a pharmacist, please submit a notarized statement with your form describing attestation to your ownership of the pharmacy.*
- I have been actively practicing in another state for the past 2 of 5 years or completed an approved internship within the two (2) years immediately preceding the submission of my Florida application.**
- I have completed 30 hours of continuing education (CE) in the past two (2) calendar years approved by the Accreditation Council for Pharmacy Education (ACPE).**
  - *Please submit a copy of your CPE monitor or copies of your approved CE certificates.*
  - *This is only required if you have been licensed for a period in excess of two (2) years from date you submit your Florida licensure application.*
- I have submitted an Electronic Licensure Transfer Application through the National Association of Boards of Pharmacy (NABP).**
  - *Please visit [www.nabp.pharmacy/programs/licensure-transfer/](http://www.nabp.pharmacy/programs/licensure-transfer/) to complete this.*
- I have submitted an examination request for the Florida MPJE through NABP.**
- 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...

- **Include** the application fee with your application.  
*Applications submitted without fees will not be processed.*
- **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.
- If you have not yet requested your exam or, have not submitted an Electronic Licensure Transfer Application, you will need to contact the National Association of Boards of Pharmacy:  
NABP:                      ☎ 1-847-391-4406                      🌐 <https://nabp.pharmacy/>

## After you submit...

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

🌐 [www.floridaspharmacy.gov](http://www.floridaspharmacy.gov)  
✉ [MQA.Pharmacy@flhealth.gov](mailto: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)...?

**Form A:** A form which verifies your graduation from an accredited College of Pharmacy. This form is also used as verification for your dates of attendance. The form must contain your college’s seal and be submitted directly from the university to be accepted.

**Form B:** A form which verifies your internship or work experience. This form should be completed by the state board of pharmacy in the state you completed your internship or from your employer. If you are self-employed as a pharmacist, please submit a notarized statement with your form describing attestation to your ownership of the pharmacy. *You may attach this to your application to expedite processing*

**Official Transcript:** A document that is submitted from the university on your behalf to the Board office. This document must be enclosed in an envelope and cannot be opened by the applicant prior to submission to the Board office. The document is used for verification of your degree and degree-conferral date.

**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.*