## **Nuclear Pharmacist - Checklist:**





## □ I have submitted the application and paid the \$55.00 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 possess a Florida Pharmacist license that is active and in good standing.
- □ I have completed 200 clock hours of formal didactic training sponsored by an approved program or university.
  - The training must meet the requirements set forth in Rule 64B16-26.303, Florida Administrative Code.
  - This training must be certified by the university or approved program and will serve as proof of eligibility.
- □ I have successfully completed 500 hours of training and experience under a supervising nuclear pharmacist.
  - The training and experience must meet the requirements set forth in Rule 64B16-26.303(2), Florida Administrative Code.
  - The training and experience must be documented on the Certificate of Training and Experience Form and submitted to the Board office with your application. The supervising nuclear pharmacist must sign and date the form.

## 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.

## After you submit...

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

- S 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