

REQUIREMENTS FOR LICENSURE BY EXAMINATION

To be eligible to be licensed as a pharmacist in Texas, an individual must:

- (1) be at least 18 years of age;
- (2) have obtained a B.S. in Pharmacy or a Pharm.D. degree from a Board approved, ACPE accredited college of pharmacy program, or have graduated from a college of pharmacy program outside the U.S. **and** have obtained full certification from the Foreign Pharmacy Graduate Equivalency Committee (FPGEC);
- (3) take and pass the NAPLEX and Texas Pharmacy Jurisprudence examination; and
- (4) complete 1500 hours of Board approved internship.

EXAMINATION REQUIREMENTS

In order for an applicant to be licensed in Texas by examination, you must register and pass the NAPLEX (North American Pharmacist Examination) and the Texas Pharmacy Jurisprudence Examination, more commonly known as the MultiState Pharmacy Jurisprudence Examination (MPJE). These examinations are administered by the National Association of Board's of Pharmacy (NABP).

- The two examinations are scored independently. If the applicant fails one exam and passes the other, the applicant must contact the Board office and pay the necessary fees by the deadlines in order to retake any exam.
- The minimum passing score on **each** exam is 75. You must obtain the required forms from the following websites:
 - (1) Texas Application for Licensing by Examination (www.tsbp.state.tx.us);
 - (2) Candidates Guide to the Texas Pharmacy Jurisprudence Examination (www.tsbp.state.tx.us);
 - (3) NAPLEX/MPJE Registration Bulletin (www.nabp.net);
 - (4) Registration forms for the NAPLEX and MPJE exams must be completed online through NABP (www.nabp.net).

The Texas application, the NAPLEX registration form, and the MPJE registration form, will suffice for one administration of the Texas Pharmacy Jurisprudence and NAPLEX examinations. **Please allow 6 weeks for the processing of your application and registration forms.** After the Board processes your application and forwards this information to NABP, you will receive an Authorization to Test (ATT). The ATT will be issued and mailed to you by The Chauncey Group International, contracted by NABP. The ATT will contain the dates you will be eligible to take the MPJE and NAPLEX, as well as other information. **Please refer to the NAPLEX/MPJE Registration Bulletin for additional important information.**

PHARMACY RULES & LAWS

Information regarding Texas Pharmacy Rules & Laws can be obtained from the Texas State Board of Pharmacy web site at www.tsbp.state.tx.us/rules/

INSTRUCTIONS

- (1) Carefully review both the NAPLEX/MPJE registration bulletin and complete the registration forms as directed in the bulletin. You must fill out both registration forms in order to take both examinations!
- (2) Complete the Texas application.
- (3) **Mail the following items to the Texas State Board of Pharmacy:**
 - (a) Completed Texas application;
 - (b) Money order (**personal check will not be accepted**) in the amount of **\$52, payable to the Texas State Board of Pharmacy**.
 - (c) A copy of an official identification (driver's license or state issued ID) containing a photograph and signature;
 - (d) A copy of your social security card; and
 - (e) A copy of your birth certificate. If you are a foreign citizen and your birth certificate is not available, send copies of **two** of the following: green card, passport, American driver's license. If you go by a name that is different from the name on your birth certificate, you must provide documentation of a legal name change.
- (4) **Mail the following items to NABP:**
 - (a) Completed NAPLEX and MPJE registrations forms. You must fill out both registration forms in order to take both examinations!
 - (b) Fee of \$430, payable to NABP for the NAPLEX administration; and
 - (c) Fee of \$170, payable to NABP for the MPJE administration. You may choose to include both fees in one money order.

All fees must be paid by money order (personal checks will not be accepted). Please include your name, address and social security number on the money orders!

Send money orders to:

NABP
PO BOX 1057
PARK RIDGE IL 60068

INTERNSHIP REQUIREMENTS

Internship requirements for Texas licensure are as follows:

I. OUT OF STATE GRADUATES WHO ARE LICENSED IN ANOTHER STATE

Out of state graduates who hold a current pharmacist license in another U.S. state, such license has not been suspended, revoked, canceled, surrendered, or otherwise restricted for any reason, will have met the internship requirements in that state and will not be required to complete additional internship hours.

II. OUT OF STATE GRADUATES WHO ARE NOT LICENSED IN ANOTHER STATE

Applicants must fulfill the Texas Board-approved internship requirement of 1500 hours. The applicant may take the examinations before the hours are fulfilled. Applicants may apply any of their internship hours gained in another U.S. state toward the Texas internship requirement, if the hours are certified to the Texas State Board of Pharmacy in writing by the other Board. Internship hours earned outside Texas will not be accepted from foreign boards of pharmacy, from any college of pharmacy, or from any preceptor or employer. It is the responsibility of the applicant to get the hours certified and transferred to the Texas State Board of Pharmacy.

The following conditions apply to non-licensed, out of state graduates who have not obtained the required number of Texas Board-approved internship hours:

- The applicant must be designated as an Extended Pharmacist Intern by the Texas State Board of Pharmacy **before** beginning work as an intern in Texas. Any hours worked before the applicant is designated as an Extended Pharmacist Intern will not be credited toward the internship requirement. If the applicant wishes to apply for Extended Pharmacist Internship, he/she must request from the Board office, complete, and return to the Board office an "Agreement for Designation as an Extended Pharmacist Intern." **Note: Proof of graduation or completion of coursework, or full FPGE certification, and a completed exam application must be on file with the Board office at the time the internship application is submitted.**
- An Extended Pharmacist Intern may perform the same functions as a Texas licensed pharmacist (with certain exceptions), provided the individual is in the presence of and under the direct supervision of Board-approved preceptor. A preceptor application will be sent with each application for Extended Pharmacist Intern. If the supervising pharmacist is not currently certified as a preceptor, the applicant must have the pharmacist complete the form, and return it to the Board office. Upon receipt of the completed form, and Board approval of the preceptor, the Board will send notification of approval to the preceptor in the form of a certificate.
- An Extended Pharmacist Intern must obtain internship hours in a pharmacy licensed by and in good standing with the Texas State Board of Pharmacy. A federally-operated facility must have signed a written agreement on file with the Texas Board, to serve as an extended internship site.
- The Board will mail a letter designating the applicant an Extended Pharmacist Intern only AFTER all of the fore-mentioned requirements have been met.

III. CONDITIONS OF THE EXTENDED PHARMACIST INTERNSHIP

The designation as an Extended Pharmacist Intern remains in effect until the earlier of the following occurs:

- Failure of the Extended Pharmacist Intern to take the NAPLEX and the MPJE within three calendar months after graduation or FPGE certification; or
- Failure to pass the NAPLEX and MPJE; or
- Failure to complete the requirements for licensure within two years after passing the required examination(s).

The Board will provide an "Internship Hours Completion Notice" on which internship hours worked in this program are to be reported. After completion of the required internship hours, the applicant must return the completed form to the Board office before the licensure process can be completed. Once the notice of completion for all required internship hours are received, a license will be issued within two weeks.

NAPLEX SCORE TRANSFER PROGRAM

The NAPLEX Score Transfer Program is administered by the National Association of Boards of Pharmacy (NABP), and is available to you when you register to take the NAPLEX in a participating and some non-participating jurisdictions. Further information on the NAPLEX Score Transfer Program can be found in the NAPLEX/MPJE Registration Bulletin, or by calling NABP at (847) 391-4406.

TESTING ACCOMMODATIONS FOR PERSONS WITH DISABILITIES

The Texas State Board of Pharmacy will abide by all applicable federal, state, and local statutes relating to the accommodation of disabled individuals. If you have a disability and may require special accommodation in taking this examination, you may request that the Texas State Board of Pharmacy make special testing arrangements for you. To ensure that the security and integrity of this examination is not compromised, the Texas State Board will evaluate special accommodation requests on a case by case basis. You are advised to contact the Texas State Board of Pharmacy to receive an *Application for Disability Accommodation*. This Application **must be received** by the Board at least 6 weeks prior to the scheduled examination date. If accommodation is not requested by this date, we cannot guarantee the availability of accommodation on-site.

EXAMINATION RESULTS

Examination results **WILL NOT BE DISCLOSED OVER THE TELEPHONE OR FAXED UNDER ANY CIRCUMSTANCES**. Examination results are processed by computer and the standard processing time for NAPLEX and MPJE results is approximately **3 WEEKS**.

Every effort is made to process and mail results as soon as possible. **DO NOT CALL THE BOARD OFFICE, OR HAVE SOMEONE ELSE CALL THE BOARD OFFICE, FOR EXAMINATION RESULTS.** DO keep us informed at all times of your correct mailing address. An incorrect address will delay your receipt of examination results.

Your cooperation will ensure that the Board staff can devote their time to the task of accurately processing the results for everyone.



TEXAS STATE BOARD OF PHARMACY

333 Guadalupe Street, Suite 3-600 ★ Austin, Texas 78701-3942
 512-305-8000 ★ www.tsbp.state.tx.us

APPLICATION FOR PHARMACIST LICENSURE BY EXAMINATION

I do hereby submit the following information to establish my eligibility for examination and licensure as a pharmacist under the Texas Pharmacy Act and Rules:

OFFICE USE ONLY
Date Received: _____
Amount: _____
Receipt NO.: _____

FIRST NAME	MIDDLE	LAST		
OTHER NAMES USED		DRIVER'S LICENSE NO. & STATE		
HOME/RESIDENT ADDRESS (Required)	CITY	STATE	ZIP	
(AREA CODE) HOME TELEPHONE		(AREA CODE) BUSINESS TELEPHONE		
Providing Address of Record Indicates You Wish the Address and Home Telephone Listed Above Maintained Confidential				
ADDRESS OF RECORD	CITY	STATE	ZIP	(AREA CODE) ALTERNATE TELEPHONE
PLACE OF BIRTH	DATE OF BIRTH	RACE/ETHNICITY	GENDER	
SOCIAL SECURITY NUMBER	Note: Disclosure of Social Security Numbers (SSN) is mandatory under Tex. Fam. Code Ann. §231.302 (Vernon 1999). The SSN is provided to identify persons relative to enforcement of child support payments.			
COLLEGE OF PHARMACY EDUCATION				
NAME OF COLLEGE		DATE ENTERED		
CITY	STATE	DATE OF GRADUATION (MM/DD/YY)		
COUNTRY	DEGREE OBTAINED			
CERTIFICATIONS, LICENSES, AND REGISTRATIONS				
Have you ever been or are you currently certified as a pharmacist intern, registered as a pharmacy technician or licensed as a Texas pharmacist. If yes, please list details below.				
INTERN #	PHARMACIST LICENSE #	TECHNICIAN REGISTRATION #	DATE ISSUED	

PREVIOUS EXAMINATION AND LICENSURE RECORD

If you have previously taken an examination for pharmacist licensure in Texas, or in any other state, please provide the following information. **If you are, or have been, licensed in another state as a pharmacist, you must contact that state board of pharmacy to certify in writing, to the Texas State Board of Pharmacy, the dates and disciplinary standing of your licensure.** If needed, attach additional sheets.

State	Date of Exam	Passed or Failed	License Number

ALL APPLICANTS MUST ANSWER THE FOLLOWING QUESTIONS:

1	Are you licensed in any other state(s)? If so, please list the state(s) of licensure and your license number in that state. State(s) Licensed and License No. _____	<input type="checkbox"/> YES*	<input type="checkbox"/> NO
2	Have you been the subject of <u>any</u> professional disciplinary action or are any such actions pending against you by a regulatory authority? (Examples: surrender, revocation, reinstatement, suspension, fine, probation, restriction) Include such information for <u>all</u> states, including Texas, and for all regulated professions.	<input type="checkbox"/> YES*	<input type="checkbox"/> NO
If you answered "yes" to Question #2, include the name of the Board, licensing or disciplinary authority and the date of the Order, and, if applicable, the date of the termination of the condition and/or probation.			
3	For any criminal offense, including those pending appeal, have you ever: A. been arrested? B. pled nolo contendere or guilty? C. received deferred adjudication? D. been convicted of a misdemeanor? E. been convicted of a felony?	<input type="checkbox"/> YES* <input type="checkbox"/> YES* <input type="checkbox"/> YES* <input type="checkbox"/> YES* <input type="checkbox"/> YES*	<input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO
In answering Questions #3A-E, include all offenses – even those for which you were subject to deferred adjudication. (Examples: assault, theft, possession of controlled substances, public intoxication, DWI, driving under the influence of drugs.)			
4	Have you been subject to a court ordered probation or confinement as related to any offense?	<input type="checkbox"/> YES*	<input type="checkbox"/> NO
5	Have you been convicted of a drug or alcohol related offense, or been subject to a deferred adjudication for this offense? (Examples: possession of controlled substances, public intoxication, DWI, driving under the influence of drugs.)	<input type="checkbox"/> YES*	<input type="checkbox"/> NO
If you answered "yes" to Questions #3-5, include the name and location of the court, the offense charged, a brief explanation of the offense, the date of action, and, if applicable, the date that probation or confinement ended.			

NOTARIZED APPLICANT AFFIDAVIT

I, _____, hereby attest to the fact that I am the applicant whose signature appears below, and that the information on this form, as well as the information on this form, as well as the information on any attachment(s) to this form, is to the best of my knowledge true and correct and that the information is given of my own free will. I agree that any misstatement(s) or omission(s) as to material facts will constitute violation of the Texas Pharmacy Act and subject me to the penalties set forth in the Act.

Signature of Applicant

Date

Signature of Notary:

Subscribed and sworn to before me this _____ day of _____ A.D. 20 _____

Notary Public in and for _____ County, _____ State.

My certificate expires _____



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**** DO NOT CERTIFY THIS PAGE UNTIL AFTER GRADUATION HAS OCCURRED ****

AFFIDAVIT OF COMPLETION OF COURSEWORK AND GRADUATION FROM ACPE-ACCREDITED COLLEGE OF PHARMACY

This is to certify that _____ attended the
_____ College of Pharmacy, from _____ until
_____, and on _____, completed all requirements for
graduation from the _____ year program. The degree of _____ was
conferred on him/her on _____.

Signed _____
(Dean or Registrar)

Date _____

(AFFIX SEAL HERE)

Address: _____

I. NON-TEXAS GRADUATES

If you are a graduate of a non-Texas College of Pharmacy, or have graduated from a Texas College more than one semester ago, detach this page and have the Dean or Registrar complete and return it to the Texas State Board of Pharmacy.

II. TEXAS GRADUATES

If you are a recent graduate from a Texas College of Pharmacy, your graduation will be certified automatically to the Board by your Texas College, and this affidavit is not required.

III. FOREIGN COLLEGE OF PHARMACY GRADUATE

If you are a graduate of a foreign College of Pharmacy, please attach a copy of your FPGEC certification in place of this affidavit.