



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 VIA NAPLEX SCORE TRANSFER

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:

| | | | |
|--------------------------------------|--|-------------------------------|--------|
| FIRST NAME | MIDDLE | LAST | |
| | | | |
| OTHER NAMES USED | | DRIVER'S LICENSE NO. & STATE | |
| | | | |
| MAILING ADDRESS | CITY | STATE | ZIP |
| | | | |
| (AREA CODE) HOME TELEPHONE NUMBER | (AREA CODE) BUSINESS TELEPHONE NUMBER | | |
| | | | |
| PLACE OF BIRTH | DATE OF BIRTH | RACE/ETHNICITY | GENDER |
| | | | |
| SOCIAL SECURITY NUMBER | <small>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.</small> | | |
| | | | |
| COLLEGE OF PHARMACY EDUCATION | | | |
| NAME OF COLLEGE | | DATE ENTERED | |
| | | | |
| CITY | STATE | DATE OF GRADUATION (MM/DD/YY) | |
| | | | |
| COUNTRY | DEGREE OBTAINED | | |
| | | | |

| |
|------------------------|
| OFFICE USE ONLY |
| Date Received _____ |
| Amount _____ |
| Receipt No. _____ |

TAPE A PHOTOGRAPH
 TAKEN WITHIN 60 DAYS
 OF THE FILING OF THIS
 APPLICATION

**NO POLAROID OR
 SCANNED IMAGES**

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 |
| | | | |
| State | Date of Exam | Passed or Failed | License Number |
| | | | |
| 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. | | | |

CHARACTER REFERENCE

I hereby certify that I have been personally acquainted with _____
for _____ months and to the best of my knowledge, _____ is of good
moral character and is not addicted to alcohol or other drugs so as to render _____ unfit to
practice pharmacy. I recommend _____ as worthy to be licensed as a pharmacist.
Remarks: _____

Signature of Reference

| | | | |
|-----------------------------------|---------------------------------------|-------|----------|
| Reference: Print First Name | Middle | Last | |
| Street Address | City | State | Zip Code |
| (Area Code) Home Telephone Number | (Area Code) Business Telephone Number | | |

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 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 _____



TEXAS STATE BOARD OF PHARMACY

333 Guadalupe Street, Ste. 3-600 ★ Box 21 ★ Austin, Texas 78701-3942
512-305-8000 ★ 512-305-8082 (fax) ★ www.tsbp.state.tx.us

**** 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 _____ Date _____
(Dean or Registrar)

(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.

REQUIREMENTS FOR LICENSURE BY EXAMINATION VIA SCORE TRANSFER

This is to notify you that the Texas State Board of Pharmacy has received your NAPLEX score attained from the recent exam administration. This exam score was received from the National Association of Boards of Pharmacy (NABP) through the NAPLEX Score Transfer Program.

If you wish to seek pharmacist licensure by examination via score transfer in Texas, you must meet the following requirements:

- (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 Texas Pharmacy Jurisprudence Examination, more commonly known as the MultiState Pharmacy Jurisprudence Examination (MPJE). This examination is administered by the National Association of Board's of Pharmacy (NABP). A minimum score of 75 is required.
- (4) complete 1500 hours of Board approved internship (waived upon receipt in this Board office of current licensure and good standing in another U.S. state).

If you hold current pharmacist licensure in good standing in another U.S. state, you will have met the internship requirements in that state and will not be required to complete additional internship hours. **It is the applicant's responsibility to have their state board of pharmacy certify their licensure standing, in writing, to the Texas State Board of Pharmacy.**

Applicants may also apply any of their internship hours, gained in another U.S. state toward the Texas internship requirement, **if** the hours are accepted and certified in writing by the other state's board of pharmacy to the Texas State Board of Pharmacy. Internship hours earned outside Texas are not accepted from foreign boards of pharmacy, or from any college of pharmacy, or of from any preceptor or employer. It is the responsibility of the applicant to get the hours certified and transferred to the Texas Board.

Your transferred NAPLEX score is valid for a period not to exceed two years from the date of exam administration. If you desire to seek licensure in Texas via score transfer, you must use the score within the two-year period.

GENERAL INSTRUCTIONS

The Texas Pharmacy Jurisprudence Examination, more commonly known as the MultiState Pharmacy Jurisprudence Examination (MPJE), is administered by the National Association of Board's of Pharmacy (NABP). The MPJE is administered daily, Monday through Friday, excluding holidays, through the Sylvan Technology Centers. The minimum passing score on this exam is 75. Testing appointment information, fee information, participating jurisdictions, and other important procedures are contained in the NAPLEX/MPJE Registration Bulletin.

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 may be obtained at your college of pharmacy or contact Lisa Ake at (512) 305-8011, or lisa.ake@tsbp.state.tx.us.

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 MPJE registration form as directed in the bulletin.
- (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 recent photograph;
 - (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 MPJE registration form;
- (b) Score Transfer form (see Bulletin);
- (c) Fee of \$170, payable to NABP for the MPJE administration; and
- (d) Score Transfer fee of \$75, payable to NABP. 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 order!

Send money order to:

NABP
PO BOX 1057
PARK RIDGE IL 60068

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.