

Kentucky Board of Pharmacy
State Office Building Annex, Suite 300
125 Holmes Street
Frankfort, KY 40601
Phone 502-564-7910 Fax 502-696-3806



PHARMACIST LICENSE RENEWAL APPLICATION

Please print legibly. Enclose check or money order made payable to 'Kentucky State Treasurer' for the amount of \$80.00. Return the completed application to the Kentucky Board of Pharmacy no later than February 28th.

Incomplete or illegible applications will be returned to applicant for correction.

Name _____ RPh License No _____

Street _____ Home Phone _____

City _____ County _____ State _____ Zip _____

E-mail Address _____ Birthdate _____ Social Security Number _____

Primary Place of Employment: [Please provide secondary places of employment on additional sheet and attach.]

Pharmacy/Business Name _____

Kentucky Pharmacy Permit Number _____ Phone No. _____

YOUR APPLICATION FOR RENEWAL WILL BE RETURNED UNLESS ALL QUESTIONS ARE ANSWERED, ANY REQUIRED EXPLANATION IS PROVIDED AND THE APPLICATION IS DATED AND SIGNED.

- A. Have you ever been convicted of any law relating to the practice of pharmacy, drugs, or controlled substances which you have not previously reported to this Board? _____YES, attach an explanation _____NO
- B. Have you been refused licensure or re-licensure by any Board of Pharmacy which you have not previously reported to this Board? _____YES, attach an explanation _____NO
- C. Have you had a Pharmacist or Pharmacy license/permit surrendered to or fined, suspended, probated, or revoked by any Board of Pharmacy which you have not previously reported to this Board? _____YES, attach an explanation _____NO

The CE requirement of 15 contact hours applies to all Kentucky pharmacists regardless of state of residence or practice. As in previous years, pharmacists newly licensed by examination during the last year are exempt from that year's CE requirements.

- D. Have you completed the continuing education requirements of a minimum of one and five-tenths (1.5) CEU (fifteen (15) contact hours) annually between January 1 and December 31 per 201 KAR 2:015, Section 5 (1)(a)?
{Do not submit proof of CE with your renewal} _____YES _____NO, attach an explanation
- E. Pursuant to KRS 315.065(2), each Kentucky licensed pharmacist is required to complete 0.1 CEU of an ACPE or Cabinet for Health Services approved HIV/AIDS continuing education course at least one (1) time every ten (10) years. You must maintain this certificate for a minimum of ten (10) years. Please provide the year of completion for the course that meets this requirement.

_____YEAR

I certify that I am not in default nor have I received notice of being in default of any insured Student Loan under the Federal Family Educational Loan Program [FFELP] that is administered by or through the Kentucky Higher Education Assistance Authority or equivalent state or federal agency. A pharmacist who makes a false, fraudulent or forged statement or misrepresentation of a material fact in securing renewal of a license is subject to disciplinary action pursuant to KRS 315.121(1)(e).

DATE

SIGNATURE

- **PRECEPTORS** - Pharmacists seeking to serve as preceptors, but not yet certified, must have been licensed in Kentucky for not less than one year and submit a written request to the Board office. There is no additional fee for this status. Pharmacists no longer wishing to serve as a preceptor must submit a written request of removal to the Board office.

- **NAME CHANGES** - Pharmacists who have undergone a name change and who request their license to be issued in a name other than that provided for in their original application or pursuant to a subsequent request for a name change are required to provide a copy of legal documentation of the name change, i.e. a marriage license, divorce decree or other judgments of a court of competent jurisdiction.

- **KRS 315.110(3)** requires a pharmacist to possess a current pocket certificate at all times when engaged in the practice of pharmacy.

- **KRS 315.065(2)** No pharmacist's license shall be renewed until the license holder is able to submit written proof to the board that he has satisfactorily completed, in the previous renewal period, a continuing education program acceptable to the board. Such continuing education requirements shall be determined by regulation of the board, and shall include, at least one (1) time every ten (10) years, the course described in KRS 214.610(1), but they shall not require more than an average of one and one-half (1-1/2) continuing education units (CEU) per year. The board may in its discretion require completion of the course described in KRS 214.610(1) more frequently.