

**ALABAMA STATE BOARD OF PHARMACY**  
111 Village St.  
Birmingham, AL 35242

**PRECEPTOR APPLICATION**

Name: \_\_\_\_\_ License Number \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Social Security # \_\_\_\_\_

Have you been licensed to practice pharmacy at least two (2) years? \_\_\_\_\_

Name/Address of employer: \_\_\_\_\_  
\_\_\_\_\_

Are you employed on a full time basis? \_\_\_\_\_

Have you ever appeared before the Board for any type violation? \_\_\_\_\_

Any change in employment must be reported to the Board promptly.

Section 34-23-73, Title 34 Chapter 23, Code of Alabama 1975 states "Every pharmacist serving as a preceptor shall have expressed a willingness to serve as a preceptor. Pharmacist preceptors shall be approved by the board and shall be willing to cooperate with the board in developing the necessary training requirements and shall provide appropriate documentation to the board. Each preceptor shall certify as to the commencement and completion of the training period and may make recommendations to the board concerning the competency of his or her trainee. The preceptor shall report to the board from time to time as requested on the progress of any intern or extern under his or her supervision. It shall be his or her responsibility in a supervisory capacity to see that each intern or extern receives proper training under the objectives of the board for this practical training program."

Paragraph 6, Rule 680-X-2-.16, Title 34 Chapter 23, Code of Alabama 1975, states, "Internship may be acquired only under the supervision of preceptor who may supervise no more than three (3) externs/interns at any one time."

In signing this application, applicant agrees to abide by the above conditions.

Date attended Seminar: \_\_\_\_\_ Signed: \_\_\_\_\_