

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

PRECEPTOR APPLICATION

Name: _____ License Number _____

Home Address: _____

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 of violation? _____

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.”

Rule 680-X-2-.09 Training For Preceptors: In accordance with Section 34-23-73, Title 34, Chapter 23, Code of Ala. 1975, in order to be approved as a preceptor, a Pharmacist must have been licensed to practice pharmacy for a minimum of two (2) years and complete an initial two (2) hour board approved preceptor training program. All Pharmacists who have been approved by the Alabama State Board of Pharmacy as Preceptors must complete a two (2) hour training seminar for preceptors each renewal cycle or be approved by the School of Pharmacy for curriculum hours. Such training seminar shall have prior approval of the Board.

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: _____

Location of Seminar: _____

Signature: _____