## LICENSE TRANSFER FORM & PROCEDURES FOR CANADIAN PHARMACISTS

NORTH DAKOTA STATE BOARD OF PHARMACY 1838 E Interstate Ave Suite D Bismarck, ND 58503 Phone (701) 877-2404 Fax (701) 877-2405

Email: <a href="mailto:ndboph2@ndboard.pharmacy">ndboph2@ndboard.pharmacy</a>. Website: <a href="mailto:www.nodakpharmacy.com">www.nodakpharmacy.com</a>

To reciprocate [transfer] your Canadian Pharmacist License to North Dakota, you are required to complete the following form to be submitted along with \$175 to the North Dakota State Board of Pharmacy:

1. Full Name of App	licant									
	First	Middle Initial			Last					
2. Home Address										
	Street & Apt Number	PO Box#	City		State	Zip				
3. Gender:		Date of Birth _								
			Month	Day	Year					
4. Email address:	Email address:NABP e-Profile ID:									
5. Social Security Number Phone Number										
6. Place of Birth										
	City		Province							
7. Name of School/	College of Pharmacy G	raduated from:				_				
8. Indicate name, c	ity and state/province	e as you desire it	to appear on	your Or	riginal Certi	ficate:				
First name	Middle Initial	Last Name	City			State/Province				

- Have you ever voluntarily surrendered your registration or license issued by a controlled substance authority? YES
   NO
- Has your license or registration ever been revoked, suspended, restricted, terminated or otherwise been subjected to disciplinary action [public or private] by any authority? YES NO
- Are you presently under investigation or is there any disciplinary action pending against you by any licensing
  jurisdiction or other authority, for violation of any pharmacy, liquor or drug laws? YES NO
- Have you ever been charged or convicted [including nolo contendere plea or guilty plea] of a felony or misdemeanor [other than minor traffic offenses] whether or not sentence was imposed, suspended, expunged, or whether you were pardoned from any such offense? YES NO
- Do you currently have any impairment including, but not limited to, substance or alcohol abuse or dependency, that in any way affects your ability to practice pharmacy in a safe and competent manner? YES NO
- Have you ever had any application for initial registration or licensure, renewal of registration or licensure, or registration or licensure denied by any licensing authority whether in pharmacy or any other profession? YES NO

If you answered "YES" to any of the above Disclosure Questions, please include specific details for review and consideration.

I understand that falsification of the information on this form may constitute grounds for denial or revocation of the registration / license. I hereby certify under penalty of perjury under the laws of the State of North Dakota to the truth and accuracy of all statements and representations made in this application and that I personally completed the application. I understand that I must notify the Board in writing of any change of address or employment. I have read and understand the instructions and statements on this application.

Signed:	 	 	

## The breakdown of the \$175 non-refundable fee is as follows:

- \$150.00 Reciprocity (license transfer) administrative fee
- \$ 25.00 Original Certificate Fee Mailed upon issuance of licensure

Qualifications for a Canadian Pharmacist license transfer to North Dakota are: (supporting documentation must be sent with application):

- The applicant has passed the NAPLEX or both part I and part II of the Pharmacy Examining Board of Canada (PEBC) Pharmacists Qualifying Examination.
- The applicant completed educational requirements for a pharmacist license from a school of pharmacy accredited by ACPE or accredited by the Canadian Council for Accreditation of Pharmacy Programs (CCAPP).
- o If the applicant held a pharmacist license for 1 year in Canada, they have acquired a minimum of 1,500 hours of pharmacy practice either through an approved internship or hours engaged in the practice as a pharmacist. (Provide one year of paystubs for example)

You must complete the NABP Electronic Licensure Transfer Program® (e-LTP™) application online at <a href="https://www.nabp.pharmacy">www.nabp.pharmacy</a>. Upon review, NABP will send the Board your Official e-LTP Application [electronically]

Upon receipt of this completed form, electronic Official e-LTP Application and the \$175 fee, the Board will review for approval to sit for the ND Multistate Pharmacy Jurisprudence Examination (MPJE). You will apply online, through the e-LTP at <a href="www.nabp.pharmacy">www.nabp.pharmacy</a>, to sit for the MPJE. NABP will notify the Board and ask for verification of your eligibility. If all forms/applications and fees are received and acceptable, we will authorize you to take the MPJE. NABP will then send you an authorization to test number, which you need to make an appointment to sit for the MPJE Examination.

Upon notification from NABP of successful completion of the MPJE, the Board will proceed with your licensure in North Dakota as a Pharmacist.

A current revision of the Laws and Rules is available on our website: <a href="www.nodakpharmacy.com">www.nodakpharmacy.com</a> left-hand side Laws/Rules. You may download it or print it to prepare for the ND MPJE Examination.

If you have any questions or there are any changes made to the data submitted, *PLEASE* contact the Board for clarification. Good Luck and Best Wishes.