

## University Health Pharmacy Technician Training Program Application Department of Pharmacotherapy and Pharmacy Services

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Ann	licant	Inforn	nation:	

Name:	
Date of bir	th:
Address:	
Phone nur	nber:
Email addr	ress:
Yes or No	Are you a current employee with University Health?
	Have you been an employee with University Health in the past?

## Attestations:

By checking the boxes below, I attest that the following statements are true and accurate:

If yes, fill in the following information: License number:

I have a U.S. Social Security number.

I am at least 18 years old and have a copy of high school diploma or GED.

I have a home computer and internet to complete online modules.

I agree to register with the Texas State Board of Pharmacy (TSBP) as a technician in training (to be completed AFTER applicant is offered a student position).

Are you currently licensed with the Texas State Board of Pharmacy as a Pharmacy Technician Trainee?

Expiration date:

I agree to take the certified pharmacy technician exam within 7 days after program completion.

I agree to register with TSBP as a registered pharmacy technician after obtaining certification.

## **Student Financial Obligation:**

Program tuition	FREE
State registration tech in training	\$105
State registration RPhT	\$84
Certification exam	\$129
Certification pre-exam	\$19
Certification Practice bank	\$65
Scrubs (median price)	\$70
Total (approximate)	\$472

## **Instructions:**

- 1. Complete the sections above
- 2. Write an essay:
  - a. 1-2 pages, double-spaced
  - b. Summarize your interests in pursuing a career as a certified pharmacy technician
  - c. Submit your essay as either a Word document or PDF
- 3. Email the following documents to: PharmTech@uhtx.com
  - a. Completed application
  - b. Essay
- 4. Questions: Email PharmTech@uhtx.com

"By typing your name below, you confirm that you are the person filling out the application and that you have read and understood the information above."