Washington State Department of
Health
Washington State Board of Pharmacy
1300 Quince Street SE
P.O. Box 47863
Olympia, WA 98504-7863
(360) 236-4825

FOR OFFICE USE ONLY
Validation:
Rec'd Date:
Issuance Date:

APPLICATION FOR PHARMACIST PRECEPTOR

LICENSE #

Please Type or Print Clearly.

1. Demographic Information

PHARMACIST NAME		
PHARMACIST STREET ADDRESS		
CITY	STATE	ZIP
NAME OF PHARMACY		
PHARMACY STREET ADDRESS		
CITY	STATE	ZIP

PHARMACY LICENSE NO.	PHARMACIST LICENSE NO.
DATE OF LAST PHARMACY INSPECTION	SCORE *(MUST BE 90–100)*
HOME TELEPHONE ( )	BUSINESS TELEPHONE ( )

2. Certification

I hereby certify that I understand and will abide by the preceptor standards and regulations pertaining to internships as found in Chapter 246-858 WAC, and the above statements are true. Furthermore, I am willing to teach an intern how to assume the full responsibilities of a pharmacist. I will supervise the intern adhering to guidelines set forth in the Washington State Board of Pharmacy "Experiential Training Manual, For Use by Pharmacy Preceptors, Interns and technicians."

SIGNATURE OF APPLICANT	DATE

Official Use Only

Washington State Records Center

Washington State Department of Health

Preceptor Certification Exam

Answer Sheet

Instructions: To obtain 3 hours of continuing education credit, or 0.3 CEUs, answer the exam questions and check your answer below. **There is only one correct answer per question.** You must achieve a minimum score of 75% to earn credit and become certified. Mail this answer sheet to Board of Pharmacy, PO Box 47863, Olympia WA 98504-7863.

Please Print

Name: _____ RPh License No.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Pharmacy: _____

1.	A❑	B❑	C❑	D❑	E❑	17.	A❑	B❑	C❑	D❑	E❑
2.	A❑	B❑	C❑	D❑	E❑	18.	A❑	B❑	C❑	D❑	E❑
3.	A❑	B❑	C❑	D❑	E❑	19.	A❑	B❑	C❑	D❑	E❑
4.	A❑	B❑	C❑	D❑	E❑	20.	A❑	B❑	C❑	D❑	E❑
5.	A❑	B❑	C❑	D❑	E❑	21.	A❑	B❑	C❑	D❑	E❑
6.	A❑	B❑	C❑	D❑	E❑	22.	A❑	B❑	C❑	D❑	E❑
7.	A❑	B❑	C❑	D❑	E❑	23.	A❑	B❑	C❑	D❑	E❑
8.	A❑	B❑	C❑	D❑	E❑	24.	A❑	B❑	C❑	D❑	E❑
9.	A❑	B❑	C❑	D❑	E❑	25.	A❑	B❑	C❑	D❑	E❑
10.	A❑	B❑	C❑	D❑	E❑	26.	A❑	B❑	C❑	D❑	E❑
11.	A❑	B❑	C❑	D❑	E❑	27.	A❑	B❑	C❑	D❑	E❑
12.	A❑	B❑	C❑	D❑	E❑	28.	A❑	B❑	C❑	D❑	E❑
13.	A❑	B❑	C❑	D❑	E❑	29.	A❑	B❑	C❑	D❑	E❑
14.	A❑	B❑	C❑	D❑	E❑	30.	A❑	B❑	C❑	D❑	E❑
15.	A❑	B❑	C❑	D❑	E❑	31.	A❑	B❑	C❑	D❑	E❑
16.	A❑	B❑	C❑	D❑	E❑	32.	A❑	B❑	C❑	D❑	E❑