

# Registration as a pharmacy technician

January 2016  
Version 2.0

Send your completed application to:

Pharmacy Technician – Applications to Register  
Customer Service Team  
General Pharmaceutical Council  
25 Canada Square  
London  
E14 5LQ

Contact us

Phone: **0203 713 8000**

Email: **[info@pharmacyregulation.org](mailto:info@pharmacyregulation.org)**

## Introduction to this guidance

The registration guidance notes should provide you with all of the information you require to successfully complete the registration process. Please read this document carefully before contacting the General Pharmaceutical Council (GPhC) with any queries.

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### A - Registration Dates

All entries to the register occur on either the 1st or the 15th of the month. You must apply at least 28 days before your intended entry to the register, please note you must not submit an application any sooner than 4 weeks before you are eligible to register.

You will not have access to your registration number until the date that you are due to register and you can obtain your registration number, after your successful application, from the GPhC website.

If your application is not complete and correct, we will not be able to guarantee your registration date. If any information or documents are missing we may return your application and your registration will be delayed. We will charge a £50 administration fee if we have to request missing information more than once.

Please note you will not be able to work as a pharmacy technician until your name appears on the Register and until you have been provided with a registration number.

The GPhC does not issue certificates. Your registration number and name appearing on the online register is proof of your registration.

### B - Completing the application form

The following guidance explains the requirements for each section of the attached application form.

#### **Section 1 - Personal details**

It is essential that your personal contact details are kept up to date, so that the GPhC can contact you about your registration.

### Names

Your name on this form should be identical to the name on your qualification certificates, birth certificate and proof of identity document(s) - word for word, letter for letter and including any middle names).

If your name is not identical (word for word, letter for letter) on your application form and all of your accompanying documents, you must provide supporting documentation to verify any discrepancies. Examples of supporting documentation include:

- Statutory declaration (a copy can be found on the website)
- A duplicate of your marriage certificate or certificate of civil partnership, this can be obtained from the General Register Office (please note this will not be returned)
- Deed poll certificate (please note this will not be returned).

### Date of Birth

Your date of birth must match all of your accompanying documents.

### Home address

We ask you to give us your home address. The address is not available for public view on the register, but it is required for correspondence sent by the GPhC. Once you are registered you can change your address by logging on to my GPhC.

## Section 2 - Application type

Please tell us what type of applicant you are by ticking the appropriate box on the application form.

## Section 3 - Previous applications and registration with other bodies

You must tell us if you have previously:

- Registered with the Royal Pharmaceutical Society of Great Britain (RPSGB) or the GPhC in the past as a pharmacist or pharmacy technician
- Applied for registration with the RPSGB or GPhC as a pharmacist or pharmacy technician
- Undertaken or applied to RPSGB or GPhC for pre-registration training.

If you have been registered with another UK health regulatory body or a health regulatory body outside of Great Britain you will need to provide details of your registration and a valid letter of good standing. You are not required to put details of your professional body membership in this section.

## Section 4 - Fitness to practise

We have a responsibility to check the health and character of all applicants. We do this to ensure that applicants will be able to practise their profession safely and effectively.

When we make a decision about whether or not an applicant is of good character, we look to see if there is evidence of past actions that might affect the public's confidence in the profession.

When we refer to the health of an applicant we wish to be informed of conditions that may affect an applicant's fitness to practise. If you are unwell and have a medical condition that you are managing and it does not affect your ability to practise, you do not need to inform the GPhC.

We do not consider a disability to be a health condition. You will only need to declare a disability if it has an impact on your ability to practise.

If you have answered yes to any of the questions in section 4 of the application form, please complete a something to declare form and provide supporting evidence to demonstrate your suitability to register. Please see our website for further details.

### Section 5 - Education and training

You must hold: One of the **competency** qualifications and one of the **knowledge** qualifications from the eligible qualifications that are listed in Annex A of the 'Criteria for initial registration as a pharmacy technician.'

If you hold a non-UK pharmacy qualification, in addition to the 2 approved UK qualifications, and wish to rely on this to reduce the 2-year qualifying period of work experience you must tell us: The title of this qualification, name of the awarding institution and the country where your qualification was obtained.

### Section 6 - Qualifying periods of work experience

You need to provide evidence of having completed a minimum of two years relevant work-based experience in the UK under the supervision, direction or guidance of a pharmacist to whom you have been directly accountable for no less than 14 hours per week. Within this 2 year period there must be at least 1260 hours of work experience in total, and there must be a minimum of 315 hours in each of the two years.

**Please note that even if you exceed the number of working hours before two years has elapsed you may not apply to register early. The hours which make up the work experience cannot include time taken as sickness absence, maternity/paternity leave and/or holiday.** (Please see section 7 of the GPhC Criteria for initial registration as a pharmacy technician on the GPhC's website for further information).

You can include work experience, during your pharmacy technician courses and up to 3 months before the start of the course, provided that during this time you have been working and carrying out the role of a pre-registration trainee pharmacy technician in the United Kingdom, Isle of Man or Channel Islands under the supervision, direction or guidance of a pharmacist to whom you have been directly accountable. This is because within 3 months of commencing contracted relevant work experience as a pre-registration trainee pharmacy technician you must commence or register for one of the two required qualifications listed above.

If there are gaps in your work experience, e.g. due to maternity leave, you will need to give a brief explanation in a covering letter.

If there are variations in your hours over the two years, please provide details on a separate sheet.

**If you have told us that, you hold a non- UK pharmacy qualification and that you have completed**

- One of the competency based qualifications and
- One of the knowledge based qualifications (listed in Annex A of the Criteria for initial registration as a pharmacy technician).

You are not required to complete the full 2 years relevant work experience in the UK if you provide evidence:

- That you have relevant work-based experience in the UK as a pre-registration trainee pharmacy technician under the supervision, direction or guidance of a pharmacist to whom you have been directly accountable for not less than 14 hours per week whilst you have been completing the two approved UK qualifications. You can include work experience, during your pharmacy technician courses and up to 3 months before the start of the course, provided that during this time you have been working and carrying out the role of a pre-registration trainee pharmacy technician in the United Kingdom, Isle of Man or Channel Islands under the supervision, direction or guidance of a pharmacist to whom you have been directly accountable; and
- That you hold a non-UK pharmacist or pharmacy technician qualification. You must arrange for your awarding institution to send direct to the GPhC the academic transcript relating to your qualification; and
- That you are registered or otherwise eligible to practise as a pharmacist or pharmacy technician in the country of your qualification. You must arrange for the regulatory authority or awarding institution to confirm this direct to the GPhC. If the profession is regulated in your country of qualification this is normally in the form of a letter of good standing or certificate of current professional status.

As you will first have to complete the same qualifications as a UK qualified applicant while working under the supervision of a registered pharmacist in Great Britain, Northern Ireland, the Channel Islands or the Isle of Man you will not normally be required to provide additional evidence of your language ability with your application for registration. However if a situation arises during the registration process where you require the services of a translator or another person in order to communicate in English with us we will review the evidence that has already been provided. In these cases we are likely to request further evidence of your knowledge of English before granting registration.

### Section 7 - Declaration by applicant

You must sign and date the declaration. The GPhC register is divided into parts. Part 2 is for registration as a pharmacy technician.

Fraudulently procuring an entry in the pharmacy technicians' register will be treated as misconduct and may result in removal from the Register.

### Section 8A - Declaration by countersigning pharmacist or pharmacy technician

This section must be completed by a practising pharmacist/pharmacy technician with current UK registration who is in good standing.

The pharmacist's/pharmacy technician's registration number must be provided so we can verify their details. The counter signatory is asked to declare that to the best of their knowledge the information given in the application and in any supporting information is true and accurate, and relates to you.

If you are sending your application in advance of having completed the relevant period of work experience **Section 8B must be completed by the pharmacist** under whose supervision, direction or guidance you have been working in the UK and to whom you have been directly accountable.

### Section 9- Photograph certification

You should submit a passport photograph which has been certified on the back and attached to Section 9 of your application form. Please note the photograph should be in line with UK passport requirements.

- Your photograph must be certified, signed and dated by one of the people who are listed as acceptable countersignatures by the Home Office Passport Service:  
[www.direct.gov.uk/en/TravelAndTransport/Passports/Applicationinformation/DG\\_174151](http://www.direct.gov.uk/en/TravelAndTransport/Passports/Applicationinformation/DG_174151)
- The signatory must not be related to you by birth or marriage. Neither should they be in a personal relationship with you eg. husband/wife, nor live at your address
- The signatory must have known you for **the last two years** and be resident in the UK
- The certification on the back of the photograph should read:  
*"I certify that this is a true likeness of [Mr/Mrs/Miss/Ms or other title, followed by your full name]"*
- The photograph must be signed and dated by the signatory under the certification
- Section 9 and the photograph must be signed on the same date.

**Please note that the GPhC will not accept photo certification from those that are not deemed acceptable countersignatures as listed on the Home Office Passport service. Receipt of unacceptable certification will delay the progression of your application.**

### Section 10- Equality and Monitoring

In this section an applicant may volunteer the following:

- Ethnic group
- Gender
- Whether or not you have a disability
- Religion.

### Section 11- Payment form

In this section you will need to ensure that you complete the relevant parts of the payment form. To register with the GPhC, a payment of £224 is required. If you pay your fee by credit card, a 2% surcharge will be charged on any transaction. Please note any changes to the registration fee will be publicised on our website and you will be charged the relevant fee.

If you do not progress to the register for any reason (for example, you do not provide the correct documents) you will be charged the application fee of £106 only (plus 2% credit card surcharge if applicable). Please take this into consideration before you apply.

Please note we do not accept cheque.

## C – Guidance on providing documents

### Certified documents

Your supporting documents (**with the exception of UK birth and marriage certificates**) must be certified as a true copy by one of the following:

- Solicitor (registered and in good standing with the law Society of England, Wales and Scotland)
- Commissioner for Oaths (in good standing with their regulatory authority and based in England, Wales and Scotland).

A Commissioner for Oaths can include the following legal professions:

- Notary Public
- Solicitor
- Barrister
- Legal Executive
- Licensed Conveyancer.

Please note that the GPhC will verify the registration of the legal professional that countersigns your documents with the relevant regulatory authority. Your application will be delayed if we experience any difficulty in verifying the person's registration. Therefore the legal professional must provide their full name and **personal** registration number (for instance an SRA number for a Solicitor) when certifying your documents. **Without these details your application will be delayed.**

The certification must read:

***"I certify that I have seen the original document and that this is a true copy"***

- It must be signed, dated within the last 6 months and include their legal professional registration number (for example an SRA number for a Solicitor). We will not accept documents certified by anybody apart from those legal professions listed above
- The legal professional should write their name in block capitals as well as sign the document
- We do not provide details of legal professionals to approach to certify your documents
- You should independently check the registration of the person certifying your documents with the relevant regulatory authority.

### Why must your documents be certified?

We request that the copies of the applicant's identity and qualification documents are certified so that we can verify the authenticity of the documents. As the independent regulator of Pharmacists, the GPhC has the responsibility to confirm the identity of its registrants.

### What documents must be certified?

- Qualification certificates
- Proof of identity documents-refer to section D for a list of acceptable identity documents.
- Your birth certificate if you were born outside of the UK.

### Birth and marriage certificates - Applicants born in England, Wales or Scotland

Due to Crown Copyright, The GPhC **cannot accept** copies of birth and marriage certificates which have been certified by solicitors or commissioners for oaths (anyone who certifies a birth or marriage certificate as a true copy is breaking the law).

You are required to contact the General Registers Office (or General Registers Office for Scotland if you were born in Scotland) and apply for a copy, or duplicate, of your birth certificate, and if required your marriage certificate. Please note that this copy will not be returned to you, and this is the reason we ask for a copy rather than the one given to you when you were born. The General Register Office is the only organisation that can issue duplicate certified copies of birth certificates; which are accepted by the GPhC.

Please note that the date on which your birth was registered must not be later than one year after your actual birth. If your birth was registered after this time then you will need to complete part A of a statutory declaration and send this AND the certified copy of your birth certificate with your application.

## Birth Certificate – Applicants not born in England, Wales or Scotland

If you were born outside of Great Britain you must provide a certified copy of your birth certificate and this may be certified by a solicitor or commissioner for oaths. Please do not send the original. This must be in English.

If your birth certificate is not in English please complete statutory declaration A or submit a certified copy of your birth certificate accompanied by a certified official translation (if you do not provide a certified official translation, then your birth certificate will not be accepted).

Please note that the date on which your birth was registered must not be later than one year after your actual birth. If your birth was registered after this time then you will need to complete part A of a statutory declaration and send this AND the certified copy of your birth certificate with your application.

You must arrange for a solicitor to complete Part A of a statutory declaration if:

- You do not have a copy of your birth certificate
- Your birth certificate is not in English
- Your birth was not registered within in one year of your birth.

### Translations

Any document that is not written in the English language MUST be accompanied by a translation. You must provide the original translation together with a solicitor certified copy of the document which is not in English. Translations must be carried out by a professional translator. The translator must sign and date the translation and provide their name and business address.

The translator must also certify that they are authorised to translate from the particular foreign language into English, and that the translation produced is true and accurate. The certification must be on the same page as the translation or be attached to the translation.

The translation must be a literal translation NOT an interpretation of the original document. All certifications and ink stamps on the original document must also be translated. Contact your embassy for a list of official translators.

## D – Documents to be submitted

### Proof of Identity

You must send a certified true copy of your passport, showing the photo page and the expiry date of the passport. Your passport must be valid and certified as a true copy by either a commissioner for oaths or a solicitor. **Please do not send the original.**

If you do not have a passport you should send certified copies of both your:

- driving licence (full or provisional) AND
- NHS Card (UK) (which shows your full name, address and date of birth) OR National Insurance Card (UK) (additional documents required please see below).

These must all be in date and certified in exactly the same manner as detailed in section C.

If you send a NHS card or National Insurance card (certified copy) as proof of identity, you are required to also send three of the following **original** documents (we will return them to you by recorded delivery):

- Bank/building society, credit card or financial statement (such as a pension statement)
- P45/P60
- Utility bill (water, gas, electricity, landline or broadband)
- TV licence
- Addressed payslip
- Council tax or benefit statement
- CRB disclosure certificate

All documents must be dated within the last 12 months of the date your application is received by us. The details on the document (including address) must be the same as the details on your application form.

### Qualification certificates

You are required to provide the following qualification certificates: Please note the certificates must be certified as a true copy by either a commissioner for oaths or a solicitor as detailed in section C. **Please do not send the original.**

- one of the competency based qualifications listed in Annex A, within the 'Criteria for registration as a pharmacy technician' document
- one of the knowledge based qualifications listed in Annex A, within the 'Criteria for registration as a pharmacy technician' document.

### Academic Transcripts for Overseas qualifications

An academic transcript is a full transcript of your academic record for your pharmacy qualification. It must show the years of study, the subjects you studied and the marks you obtained in each examination. It must be certified by the relevant officer at the university or academic body.

### Letters of good standing

Evidence of being registered should be provided in a Letter of Good Standing or Certificate of Current Professional Status issued by the appropriate authority of the country or state in which you originally qualified. The certificate should be issued no more than six months before the date that you expect to apply to register.

If you have practised within the last five years in countries or states other than that in which you qualified you are also required to provide a Letter of Good Standing or Certificate of Current Professional Status issued by each appropriate authority of every such country or state.

If you have not maintained your overseas registration, then you are required to obtain a certificate from all of the relevant authorities confirming the following:

- That you are no longer registered with that authority, but that the qualification you hold entitles you to register AND
- That if you wanted to re-register in the future, then there are no matters of a disciplinary or criminal nature existing, and no pending disciplinary or criminal investigations, which would prevent the authority from re-registering you and permitting you to resume practice as a pharmacy professional within their jurisdiction.

## E - Do I need to complete a Statutory Declaration?

When submitting your registration documents, please bear in mind that the names on your birth certificate, degree certificate, proof of identity document(s) and application for registration form must be identical in every way. That includes any middle names or initials you may have and any changes in spelling or order. If the names on these documents are not identical, you must see a solicitor and complete the relevant sections of a statutory declaration. Failure to do this will delay your registration.

If any of the following apply, you will need to arrange for a solicitor to complete a Statutory Declaration:

- You do not have a birth certificate or your birth certificate is not written in English  
**COMPLETE DECLARATION 'A'** or
- The registration date on the birth certificate is not within one year of the date of birth or is not shown  
**COMPLETE DECLARATION 'A'**
- You want to register in a name other than that on your birth certificate/marriage certificate e.g. additional/dropped names or letters [The name you put on the statutory declaration should be identical to that which you put on your application for registration  
**COMPLETE DECLARATION 'B'**
- Names on your degree certificate or proof of identity document(s) are not identical in every way to those on your birth certificate and application for registration form [All names must be identical: word for word, letter for letter and in the same order. Initials are not acceptable]  
**COMPLETE DECLARATION 'C'**

A copy of the statutory declaration form can be found on our website:

<http://pharmacyregulation.org/registration/registering-pharmacy-technician/uk-qualified-pharmacy-technicians#>

## F – Additional guidance documents and forms

The following documents can be downloaded from our website [www.pharmacyregulation.org](http://www.pharmacyregulation.org)

- Standards of conduct, ethics and performance
- Standards for continuing professional development
- Criteria for the initial registration as a pharmacy technician
- Guidance on registration with the GPhC and Fitness to Practise: This advises how to answer the questions on fitness to practise
- Good character assessment framework: This lists the areas we will take into consideration when you have declared a conviction or police caution
- Health assessment framework: This lists all the relevant points we will take into consideration when you have declared matters concerning your health
- Something to declare form. To be completed if you have declared a conviction, caution or health matter.

*End of guidance notes, the application form is on the following page.*

## Application checklist

I have included in my application for registration and completed (please tick):

- Guidance and criteria read and understood
- Application form (fully completed in block capitals)
- Your countersigning pharmacist or pharmacy technician has checked your application thoroughly before signing section 8A of the form – **Please note you must sign and date section 7 before it is checked by your pharmacist/ pharmacy technician**
- Birth certificate - duplicate certificate, this can be obtained from the General Register Office (please note this will not be returned)
- Marriage certificate - duplicate certificate, this can be obtained from the General Register Office (please note this will not be returned)
- Passport – certified copy (as detailed in section c of the guidance), or alternative documents
- Certificates for the competency based and knowledge based qualifications and non-UK qualification, if applicable – certified copy (as detailed in section c of the guidance)
- Payment form
- Photograph – attached to section 9 of the application form (correctly certified photograph as detailed in section B of the guidance)
- Stamped self-addressed postcard/ envelope for confirmation that we received your application

**If you have a non-UK pharmacist or pharmacy technician qualification and want to use evidence of this to reduce the 2 year qualifying period of work experience required you must arrange for the following documents to be sent direct to the GPhC:**

- Academic transcript relating to your qualification. This must be sent to the GPhC by your awarding institution (college/university)
- Evidence that you are registered or otherwise eligible to practise as a pharmacist or pharmacy technician in the country of your qualification. You must arrange for the regulatory authority or awarding institution to confirm this direct to the GPhC. If the profession is regulated in your country of qualification this is normally in the form of a letter of good standing or certificate of current professional status.

Please note we will not accept liability for any loss as a result of completed applications not reaching us. Recorded delivery is recommended.

Keep a copy of your application in case the original does not reach us.

Please sign to indicate the relevant documents are included and correct, and that you have acknowledged the statement below.

- I have fully separated the guidance notes from application and have withheld them for my own records.

Signature

Date

**Send your completed application to:**

Pharmacy Technician – Applications to Register

Customer Service Team

General Pharmaceutical Council

25 Canada Square

London

E14 5LQ

**Contact us**

Phone: **0203 713 8000**

Email: **info@pharmacyregulation.org**

## 1. Personal details

1.1 Title Mr  Mrs  Ms  Miss  Other

1.2 Surname(s)

1.3 Forename(s)

This will be your registered name

1.4 Date of birth

1.5 Home Address

Postcode

Country

1.6 Nationality

1.7 Home phone  Work

Mobile

1.8 Email address

By providing an email address, you consent to the Council serving any documents required by its various statutory rules on you at that email address

## 2. Type of application

2.1 Which application process applies to you (Please tick one box)

Applicant with approved UK qualifications and 2 year qualifying period of work experience

Applicant with approved UK qualifications and evidence of non-UK pharmacy qualification and qualifying period of work experience

### 3. Previous applications and Registration with other Bodies

- 3.1 Have you previously applied for registration with the Royal Pharmaceutical Society of Great Britain (RPSGB) or the General Pharmaceutical Council (GPhC), either as a pharmacy technician or as a pharmacist or undertaken preregistration training with the RPSGB or the GPhC?

Yes  No

If you have answered 'yes' to question 3.1 please state your application, registration or preregistration number/ type of application/ date of application

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- 3.2 Are you currently or have you previously been registered with any UK statutory health regulatory body (any member body of the Council for Healthcare Regulatory Excellence) or a health regulatory body outside Great Britain?

Yes  No

If you have answered 'yes' to question 3.2 please give details and provide a letter of good standing

Name of body

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Registration number

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### 4. Fitness to practise

**By virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and Schedule 4 of the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2003, you are exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974. You are not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act, and failure to disclose such convictions could result in disciplinary action by the Council.**

- 4.1 Has a determination ever been made against you by a regulatory body in the United Kingdom responsible under any enactment for the regulation of a health or social care profession to the effect that your fitness to practise as a member of a profession regulated by that body is impaired, or a determination by a regulatory body elsewhere to the same effect?

Yes  No

4.2 Do you currently have any problems with your physical or mental health that may impair your ability to practise safely and effectively or which otherwise impairs your ability to carry out your duties in a safe and effective manner?

Yes

No

4.3 Have you previously been convicted or cautioned for a criminal offence in the British Islands or elsewhere (which, if committed in England, Scotland or Wales would constitute a criminal offence) or have you previously agreed to be bound over to keep the peace by a Magistrates' court in England or Wales?

**Please note that Road Traffic offences in which the person committing the offence has been offered the option of paying a fixed penalty (e.g. certain speeding offences etc) will not be treated as a conviction for the purposes of registration and need not be declared.**

Yes

No

4.4 Have you previously agreed to pay a penalty under section 115A of the Social Security Administration Act 1992 (penalty as alternative to prosecution)?

Yes

No

4.5 Have you previously accepted a conditional offer under section 302 of the Criminal Procedure (Scotland) Act 1995 (fixed penalty: conditional offer by procurator fiscal) or have you previously been subject to an order under section 246(2) or (3) of the Criminal Procedure (Scotland) Act 1995 discharging you absolutely (admonition and absolute discharge)?

Yes

No

4.6 Have you previously been included by the Independent Safeguarding Authority (also known as the Independent Barring Board) barred list (in England, Wales or Northern Ireland) or the children's list or adult's list maintained by the Scottish Ministers?

Yes

No

4.7 Are you currently, or have you ever been, under investigation by any regulatory body (other than the GPhC) or criminal enforcement authority (e.g. police or NHS Counter Fraud Service) in the British Islands or elsewhere?

Yes

No

4.8 Are you currently, or have you ever been, the subject of Fitness to Practise proceedings from your academic institution or the subject of disciplinary proceedings during any training placement or employment that resulted in a sanction of suspension or dismissal in the British Islands or elsewhere?

Yes

No

If you have answered **yes** to any of these questions please provide details on the **Something to Declare** form. A copy of this form is available in the Pre-Registration section of our website **www.pharmacyregulation.org**

## 5. Education and training

Applicants should provide details of pharmacy technician qualification(s) gained in the United Kingdom. Applicants must hold one of the approved competency based qualification and one of the approved knowledge based qualification and provide solicitor certified photocopies of all relevant qualification certificates with their application.

5.1 Title of knowledge based qualification

5.2 Date commenced (month and year)

5.3 Date awarded (month and year)

5.4 Name of course provider

5.5 Title of competency based qualification

5.6 Date commenced (month and year)

5.7 Date awarded (month and year)

5.8 Name of course provider

5.9 Title of non-UK pharmacy qualification (if applicable)

5.10 Date commenced (month and year)

5.11 Date awarded (month and year)

5.12 Name of university

5.13 Country

## 6. Education and training

Provide information on your work experience as a pre-registration trainee pharmacy technician. You must provide evidence of having completed a minimum of two years relevant work-based experience in the UK under the supervision, direction or guidance of a pharmacist to whom you have been directly accountable for not less than 14 hours per week. (Please see section 7 of the GPhC Criteria for initial registration as a pharmacy technician). During these two years, you must have completed at least 1260 hours of work experience (excluding sickness absence, maternity leave and holidays) and at least 315 hours of work experience in each year.

You can include work experience during your pharmacy technician courses and up to 3 months before the start of the course provided that during this time you have been working and carrying out the roles of a pre-registration trainee pharmacy technician in the United Kingdom, Isle of Man or Channel Islands under the supervision, direction or guidance of a pharmacist to whom you have been directly accountable.

If you have a **non-UK pharmacy qualification** you have to provide evidence of this (see guidance notes) and of having worked in the UK as a pre-registration trainee pharmacy technician under the supervision, direction or guidance of a pharmacist to whom you have been directly accountable for not less than 14 hours per week.

**Gaps in work experience** - you must tell us if there are any gaps in your work experience, e.g. maternity leave, long term sick leave. On a separate sheet or covering letter, give a brief reason for the gap and start / end date.

**A. Work experience in year 1**

Name and address of organisation

Hours worked per week,

*Provide details on a separate sheet if there is a variation*

Start date (dd/mm/yy)

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End date (if applicable) (dd/mm/yy)

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Job title

Main responsibilities / duties

Name and job title of your supervising pharmacist and their GPhC registration number

Contact number of supervising pharmacist

**B. Work experience in year 2**

Name and address of organisation

Hours worked per week,

*Provide details on a separate sheet if there is a variation*

Start date (dd/mm/yy)

End date (if applicable) (dd/mm/yy)

Job title

Main responsibilities / duties

Name and job title of your supervising pharmacist and their GPhC registration number

Contact number of supervising pharmacist

**C. Any additional work experience to complete approved UK qualifications or work experience requirement**

Hours worked per week

*Provide details on a separate sheet if there is a variation*

Start date (dd/mm/yy)

  

End date (if applicable) (dd/mm/yy)

  

Job Title

Main responsibilities / duties

Name and job title of your supervising pharmacist and their GPhC registration number

Contact number of supervising pharmacist

## 7. Declaration by applicant

**This declaration must be completed and dated before you give your application and supporting documents to the counter signatory for checking.**

I declare that:

- 7.1 I am applying for registration in Part 2 of the Register and I hereby declare that, in accordance with Article 20(3) of the Pharmacy Order 2010, I intend to practise as a pharmacy technician in Great Britain, the Channel Islands or the Isle of Man.
- 7.2 The information that I have provided in this application for registration is complete, true and accurate. I am also aware that I am under a duty to notify the Registrar of any changes to my name, home address or other contact details within one month starting on the day on which the change occurred.
- 7.3 I will adhere to the standards relating to conduct, ethics and performance and continuing professional development published by the General Pharmaceutical Council.
- 7.4 I have in place appropriate indemnity arrangements.
- 7.5 I accept that I am under a duty to notify the Registrar if there is any change in the circumstances relating to the fitness to practise declaration that I have made within 7 days starting on the day on which the event occurred.

I understand that

- 7.6 If I am found to have given false or misleading information in connection with my application for registration in the Register, this may be treated as misconduct, which may result in my removal from the Register.

Signature

Date

### Data protection statement

*The GPhC is a data controller registered with the Information Commissioner's Office. The GPhC makes use of personal data to support its work as the regulatory body for pharmacists, pharmacy technicians and retail pharmacy premises in Great Britain. We may process your personal data for purposes including updating the register, administering and maintaining registration, processing complaints and compiling statistics.*

*The GPhC will not share your personal data on a commercial basis with any third party. We may share your data with third parties to meet the GPhC's statutory aims, objectives, powers and responsibilities under the Pharmacy Order 2010, the rules made under the Order and other legislation. We may pass information to organisations with a legitimate interest including other regulatory and enforcement authorities, NHS trusts, employers and Department of Health. We may also share information with universities and research institutions for the purpose of research. We will publish pharmacists' and pharmacy technicians' fitness to practise records on our website as described in the Publication and Disclosure Policy*

## 8. A - Declaration by countersigning pharmacist or pharmacy technician

This section must be completed by a practising pharmacist or pharmacy technician with current UK registration who is in good standing, after they have checked your application thoroughly and after you have signed section 7 of the application form.

I declare that:

8.1 I am on the GPhC/PSNI Register

8.2 I am in good standing with the GPhC/PSNI

8.3 I have checked the documents to be submitted and confirm that they are all present and have been enclosed with this application form

8.4 To the best of my knowledge the information given in this application and in any supporting documents is true, complete and accurate and relates to the applicant.

8.5 I know of no reason why this applicant should not be registered as a pharmacy technician

Name (Please print)

Registration number

Signature

Date

## 8. B - Declaration by supervising pharmacist

**This section must be completed if application submitted prior to completion of the 2 years relevant work based experience.**

I declare that:

8.6 I am on the GPhC/PSNI Register

8.7 I am in good standing with the GPhC/PSNI

8.8 The applicant will have complete the relevant period of work experience by: (Insert date below as dd/mm/yy)

<input type="text"/>					
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8.9 To the best of my knowledge the information given above is true and accurate and relates to the applicant.

8.10 Should I become aware of any changes to the fitness to practise declaration completed by the applicant I will notify the GPhC within 7 days of becoming so aware and advise the applicant to do likewise. I am aware of my professional obligations to do so.

Name (Please print)

Registration number

Signature

Date

## Registration of a pharmacy technician

Guidance and application form

January 2016

Version 2.1

*Staple* your Certified Photograph Here

Example of photograph certification:

*I certify this is a true likeness of*

*Give applicant's full name and title*

*Signature of certifying person and*

*date*

### 9. Photograph certification

This section must be completed by the person who signs the back of the photograph.

Name (Please print)

Address

Occupation

Phone

Email address

By countersigning this application, you agree that the GPhC may contact you to verify the information that you have provided.

I declare that I have signed the photograph attached and that I have known (insert applicants name below)

For

years and the information I have provided is correct.

Signature

Date

## 10. Equality monitoring

What is your ethnic group? (Please tick one)

### White

British  Irish  Other

### Black or Black British

Caribbean  African  Other

### Mixed

White and Black Caribbean  White and Black African   
White and Asian  Other Mixed (please specify)

### Asian or Asian British

Indian  Pakistani   
Bangladeshi  Chinese

Other ethnic group  Other Asian (please specify)

If other please specify

What is your gender?

Male  Female  Other

What is your religion?

None  Christian  Buddhist  Hindu   
Jewish  Muslim  Sikh  Other

If other please specify

Do you consider that you have a disability?

Yes  No

## 11. Payment form to register as a pharmacy technician

Name of applicant:

**Please charge this card with the sum of: £224..00**  
(£106.00 Application fee + £118.00 First entry fee)

Please indicate whether you are paying by:

Debit card       Credit card      (Payment by credit card will incur a surcharge of 2%)

Type of card (Please tick one)

MasterCard     Visa       Visa Purchasing       Visa Delta

Card Number (insert exact amount of digits in your card number only):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CSC  
number:

--	--	--

(The last 3 digits on the back of your card)

Valid From Date:

--	--	--	--

Expiry Date:

--	--	--	--

Issue number for Maestro or Solo cards only. If your card does not have an issue number please enter 'NA' in the boxes

Name of Cardholder  
(as it appears on card):

Address of account  
holder

Signature:

Date: