Pharmacy Technician Program
Adult Student Application Instructions

Thank you for your interest in the Pharmacy Technician program. Below is a list of the steps you’ll need to take in order to gain acceptance into the program.

Step 1 – Determine whether you meet the program requirements

☐ Will you be at least 18 years of age and have a high school diploma by the last day of class?

☐ Do you meet the math and reading competency requirements?
  
  • Math: Accuplacer score of 65, ACT score of 17, completion of OWATC Math I, or WSU Math 950 with a grade of C or better
  • Reading: Accuplacer score of 65, ACT score of 18, or English 1010 with a grade of C or better

☐ Do you have a clean criminal record?

☐ Does your schedule allow you to attend class every Tuesday, Wednesday, and Thursday from 5-9 pm?

If you answered no to any of these questions, please contact Tamie Tallant at tallantt@owatc.edu to discuss your options.

Step 2 – Attend a pre-enrollment orientation

We want you to have a clear understanding of the Pharmacy Technician profession and the expectations of the program prior to enrolling. Therefore, we require that all prospective students attend a 1-hour pre-enrollment orientation. You may register online at www.owatcpharmtech.eventbrite.com.

Step 3 – Compile the required documentation

This program requires on the job training. Before sending students to training sites, we need to ensure that they meet the requirements outlined by the State of Utah and their respective training pharmacy. Therefore, documentation of the following is required:

☐ Complete the application for admission, found at the end of this checklist.

☐ Submit proof of math and reading competency (test scores or transcripts)

☐ Type a 1-page summary explaining why you’re interested in the Pharmacy Technician program and your career goals.
Complete a background check

- Print the Criminal Background Check Application
- Take the application form to a local police department to get fingerprinted (typically about $15)
- Submit the completed BCI application and $15 processing fee to BCI.

Once you receive your background check, complete the State of Utah Pharmacy Technician Trainee License Application. Do not mail it to DOPL. Submit the application to Tamie along with all of your other documentation. She will return it to you once you are accepted to the program.

Read the McKay-Dee Hospital General Student Orientation Manual and complete the Adult observation packet, less than 12 hours under the Observation Student (Adult) section:

- Submit proof of immunizations (MMR, Varicella, Hepatitis B, Influenza-seasonal)
- Submit proof of negative TB Test (2-step PPD or blood test results)

Step 4 – Submit the application packet

Once you have all of the documentation, please scan a copy to Tamie Tallant at tallantt@owatc.edu. If you do not have access to a scanner, you may submit a paper copy to Tamie. If you choose this option, you will need to email her to schedule an appointment.

Step 5 – Take enrollment authorization to the Enrollment office

Once Tamie confirms that your application is complete, she will schedule a time for you to meet with her to obtain the authorization form that will allow you to enroll in the program. You will need to bring a $50 check (payable to DOPL) for the Pharmacy Technician Trainee License. You will then pay your tuition and take the authorization form to the enrollment office.

Questions?

If you have questions about the application process or are having difficulty obtaining the required documentation, please contact Tamie at tallantt@owatc.edu or Nallely at (801) 627-8324 or ruizn@owatc.edu.
You must apply for formal admission to the Pharmacy Technician Program at the Ogden-Weber Applied Technology College. Complete all the items in this application. Return the completed application along with all of the required documentation to tallantt@owatc.edu.

1. Full Name: ___________________________________________________________
   Last                                 First                             Middle Initial

2. Date of Birth: __________________________

3. Home Phone: ____________________  Work/Cell Phone:____________________

4. Email address: ______________________________________________________

5. Mailing Address: ______________________________________________________
   Number and Street                      City              State          Zip Code

6. Person to be notified in case of emergency: _______________________________
   Name                                 Relationship
   Number and Street          City               State          Zip Code                          Phone #

7. Please provide information concerning high school, college, university, or technical schools previously attended and currently attending.

<table>
<thead>
<tr>
<th>Name of School</th>
<th>City and State</th>
<th>Date of Entrance</th>
<th>Date of Exit</th>
<th>Degree Received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. Successful completion of the Pharmacy Technician program requires regular attendance. As with an employer, the expectation is 100% attendance. Students must maintain a minimum of 80% attendance in all classes. Classes are held Tuesday, Wednesday, and Thursday evenings from 5 – 9 pm. In addition, externship hours may include evenings, nights and weekends. The Externship Coordinator will do everything possible to create a externship schedule that works around other commitments, but keep in mind this may not always be possible. Can you commit to follow the prescribed hours required for pharmacy technician training?

YES □  NO □

9. Conviction of a felony may prevent you from becoming employed in the pharmacy field. Have you ever been convicted of a felony or pleaded guilty to a felony?

YES □  NO □

If yes, please explain. __________________________________________________________

_________________________________________________________________

_________________________________________________________________

I do hereby certify the statements in this application are true and complete to the best of my knowledge. I understand that falsifying information on this application may be grounds for denial of admission to the Pharmacy Technician Program or dismissal from the Ogden-Weber Applied Technology College.

Signature: ________________________________________________________________

Date: __________________________