

CONTINUING PHARMACY EDUCATION (CPE) PROGRAM APPROVAL REQUEST FORM

Instructions on completing and submitting this form are on the back of this page.

Title of Program: _____

Date(s) of Program: _____

Location: _____

CE hours requested: _____ Estimated number of participants: _____

Program Objectives:

1. _____
2. _____
3. _____
4. _____

Faculty & Credentials: _____

PLEASE SEND CV OF SPEAKER

Schedule: Time CPE Program begins: _____ Time Program ends: _____

Method used to evaluate participant learning: _____

Method used for participant evaluation of program: _____

Certificates: Would you like the CPE Review Panel to prepare CE certificates and maintain records for a fee of \$5.00 per certificate? Yes _____ No _____

Submitted by (please print): _____ Date: _____

Association/Organization: _____

Contact Person: _____

Address: _____

Phone Number: _____ E-mail address: _____

“Through my signature, I am verifying that the speaker has been instructed to present this program for the amount of time for which continuing education has been requested.”

(Signature of person submitting form)

FOR OFFICE USE ONLY

DATE RECEIVED: _____ **ACTION TAKEN:** _____

ID# _____ **APPROVED BY:** _____ **DATE:** _____

CPE PROGRAM GUIDELINES

CPE Programs Cosponsored with NCAP, Campbell University, UNC-CH School of Pharmacy or Wingate University

Continuing education programs that organizations cosponsor with the North Carolina Association of Pharmacists (NCAP), the University of North Carolina at Chapel Hill (UNC-CH) School of Pharmacy, Campbell University School of Pharmacy or Wingate University School of Pharmacy are acceptable to the North Carolina Board of Pharmacy for pharmacist relicensure. These CPE programs do not need to be reviewed through the CPE Program approval process.

CPE Programs Sponsored by Regional Pharmacy Associations/Societies, Other Organizations, or an Individual

The North Carolina Board of Pharmacy will accept for pharmacist relicensure those CPE programs approved by NCAP. CPE programs, which have been independently planned by any entity, may be submitted to NCAP for approval. Oversight of NCAP's CPE approval process will rest with a Continuing Pharmacy Education Review Panel. The Panel is comprised of the Continuing Education Directors from the UNC-CH School of Pharmacy, Campbell University School of Pharmacy, Wingate University School of Pharmacy, and two members of the NCAP Education and Program Committee. The Panel will be available to assist NCAP in determining approvability of programs and will serve as an appeal option for individuals who's requested programs were not approved. Organizations/individuals seeking approval of independently planned programs must complete the CPE Program Approval Request Form (other side of this page) as outlined below:

- I. A CPE Program Approval Request Form must be completed and submitted along with a check for \$50.00 (administrative fee) made payable to NCAP. The completed Form and check should be sent to the CPE Review Panel at least 30 days prior to the date of the CPE program. If submitted less than 30 days prior to the CPE program date, the administrative fee is \$75.00. No Request Form should be submitted after a CPE program has taken place.

Mail or fax (fax # 919 968-9430) the completed Form to.

**CPE /NCAP
109 CHURCH STREET
CHAPEL HILL, NC 27516**

If faxing the Form to NCAP, please call (919) 967-2237 to verify that it was received, and send check in the mail.

- II. Within 10 days of receipt of the Approval Request Form, NCAP will notify the contact person of the requesting organization of its action (approval or denial). **A Participant Roster form will be mailed to the contact person. The completed Participant Roster must be returned to the NCAP office within 10 days after the CPE program.**
- III. Certificates of attendance required by the NC Board of Pharmacy may be:
 - A. Assumed as a responsibility of and prepared by the organization providing the CPE Program. A copy of such a certificate prepared for program participants must be submitted to the CPE Program office within 10 days after the CPE program, along with the completed Participant Roster.
 - B. Requested as a service of NCAP.
 1. Within 10 days after the CPE program, the requesting organization must submit to NCAP:
 - a. The Participant Roster.
 - b. Payment of \$5.00 per certificate to be printed.
 2. CPE certificates will be prepared and mailed in bulk to the contact person indicated on the Approval Request Form.
- IV. Participant evaluations of the CPE program need not be sent to NCAP. The Panel recommends that the sponsoring organization keep them on file for three (3) years for potential review by the Board of Pharmacy.
- V. NCAP will maintain records on all programs for three (3) years.
- VI. To repeat a previously approved CPE Program, a new CPE Approval Request Form must be submitted 30 days in advance of the rescheduled program. If the program is identical in every aspect except the dates, faculty credentials (e.g., CV) need not be provided.