

| Do Not W<br>Recelpt#: | Irite In This Section: |
|-----------------------|------------------------|
| Amount:               |                        |
| Applicant             |                        |
| Initials/Date         | e:                     |

Address: Georgia Board of Pharmacy, 2 Peachtree Street N.W., 6<sup>th</sup> Floor, Atlanta, GA 30303

Telephone #: (404) 651-8000 Fax #: (678) 717-6694 Website: www.gbp.georgia.gov

## GEORGIA TEMPORARY PHARMACY INTERN APPLICATION

(for use in a State of Emergency only)

**INSTRUCTIONS:** The Georgia Board of Pharmacy may issue a temporary pharmacy intern license to a temporary pharmacy intern license applicant who produces satisfactory evidence of fulfilling the requirements for intern licensure and evidence of an emergency situation justifying the temporary license. Please complete the following application. Applicant's Name (First, Middle, Last): Permanent Address: \_\_\_ Mailing Address (if different): Phone: \_\_\_\_\_ Email: \_\_\_\_\_ SS#: \_\_\_\_\_ List the state in which you have a current intern license to practice pharmacy in good standing and the license number. Describe the emergency situation that justifies your application for a temporary license. By submission of this application, I swear and attest that I meet all conditions for pharmacy intern licensure required by law. I understand that a temporary pharmacy intern license shall expire at the end of the month following the third board meeting conducted after the issuance of such license and shall not be renewed. Signature of Applicant: Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_\_ , 20 .

My commission expires:

09/09/2016

(seal)

Notary Public:

## AFFIDAVIT OF APPLICANT

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Pharmacy, and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, I hereby swear and affirm one of the following to be true and accurate pursuant to

| O.C.G.A. § 50-36-1:  |  |   |
|--|--|---|
| 1) Iam a United States citizen 18 years of age of  | r older. Please submit a cop                             | by of your current Secure and                               |
| Verifiable Document(s) such as driver's license, passport, or  | or document as indicated on                              | pages 3 & 4 of this application.                            |
| 2) Iam not a United States citizen, but Iam a le or older, or Iam a qualified alien or non-immigrant under the or older with an alien number issued by the Department of Please submit a copy of your current immigration documen number and, if needed, SEVIS number. | he Federal Immigration and<br>Homeland Security or other | Nationality Act 18 years of age federal immigration agency. |
| In making the above attestation, I understand that any failure to disciplinary action by the Georgia State Board of Pharmacy and   |  | closures may result in                                      |
| Signature of Applicant Date  |  |   |
| Print Applicant's Name   |  |   |
| Personally appeared before me, the undersigned official authori  | zed to administer oaths, con                             | mes   |
| who deposes and swears (Applicant's Name)  | that he/she is the person w                              | rho executed this   |
| application for a temporary pharmacy intern license in the State   | of Georgia; and that all of t                            | he statements   |
| herein contained are true to the best of his/her knowledge and b   | elief.   |   |
| Sworn to and subscribed before me this day of  | , 2  |   |
| Notary Public Signature  | <u> </u>   |   |
|  | County   | State   |
| My Commission Expires  |  |   |
| (seal)   |  |   |

## APPLICANT: PLEASE CHECK THE FORM OF IDENTIFICATION BELOW THAT YOU POSSESS. RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.

| Name  |
|---|
| Secure and Verifiable Documents under O.C.G.A. § 50-36-2 Issued August 1, 2012 by the Office of the Attorney General, Georgia   |
| The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA") provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.   |
| The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.  |
| A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]  |
| A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]   |
| A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]  |
| An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]  |
| A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: <a href="http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm">http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm</a> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2] |
| A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]   |
| An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]  |

| _A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]   |
|---|
| _A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]  |
| _A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]  |
| _A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]   |
| <br>_A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. §50-36-2(b)(3) 22 CFR § 41.2]   |
| _A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]  |
| _A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]   |
| <br>_A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]  |
| _A Certification of Report of Birth issued by the United States Department of State (Form DS-1350 [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]   |
| _A Certification of Birth Abroad issued by the United States Department of State (Form FS-545) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]  |
| <br>_A Consular Report of Birth Abroad issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]  |
| _An original or certified copy of a birth certificate issued by a State, county, municipal authority, or  |
| territory of the United States bearing an official seal [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]   |
| In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § secure and 50-36-2(c)] |