# The Commonwealth of Massachusetts

Executive Office of Health and Human Services Department of Public Health Bureau of Health Professions Licensure

**Board of Registration in Pharmacy**

# 250 Washington Street, Boston, MA 02108-4619

Tel: 617-973-0960

Fax: 617-973-0980

[pharmacy.admin@mass.gov](mailto:pharmacy.admin@mass.gov)

PHARMACY TECHNICIAN IN TRAINING EXTENSION REQUEST

Board regulations impose a limitation on employment as a Pharmacy Technician Trainee (PTT) to no more than 1500 hours or one year, whichever period is shorter, unless the Board grants an extension. This application may be used to apply for an extension.

## LICENSEE INFORMATION

|  |  |
| --- | --- |
| LICENSE NUMBER: | |
| First Name: | Last Name: |
| Email: | Phone: |
| Current place of employment: | City: |
| Number of hours completed as a Pharmacy Technician in Training: | |

**I am requesting that the Board extend my ability to work as a Pharmacy Technician in Training beyond one year because:**

I have not reached 18 years of age. Date of Birth: I have not yet completed at least 500 hours of employment as a Pharmacy Technician Trainee. (Please give us a **detailed** explanation)

Other (Please explain in detail why you need the extension)

## I have spoken with the pharmacy manager about getting the hours and training necessary to apply for a Pharmacy Technician license before my license expires.

***Please note: An individual who has worked as a pharmacy technician trainee for more than 1500 hours or for more than one year prior to their 18th birthday shall apply for a pharmacy technician license within 30 days of their 18th birthday.***

|  |
| --- |
| Signature of Licensee: |
| Date: |