



# The Manitoba Pharmaceutical Association

200 TACHE AVENUE, WINNIPEG, MANITOBA R2H 1A7  
Phone: (204) 233-1411 Fax: (204)237-3468 E-mail: info@mpha.mb.ca

## 2011 PRACTICING LICENCE APPLICATION IN A PATIENT CARE SETTING

(Title)	(Last Name)	(First Name)	(Middle Initials)
(Street Address)	(City)	(Province)	(Postal Code)
(Home Phone Number)	(Work Phone Number)	(Work Fax Number)	
(E-Mail Address)	(Cell/Pager)		

**The above is REQUIRED information and MUST be provided where applicable.**

**Primary Employer:** \_\_\_\_\_

Employment Category: \_\_\_\_\_ (refer to Table G of the **attached CODE TABLE** to make any changes)

Range of Estimated Weekly Practice Hours: \_\_\_\_\_ (refer to Table H)

Position: \_\_\_\_\_ (refer to Table I)

Place of Employment: \_\_\_\_\_ (refer to Table J)

**Secondary Employer (if applicable):** \_\_\_\_\_

Employment Category: \_\_\_\_\_ (refer to Table G of the **attached CODE TABLE** to make any changes)

Range of Estimated Weekly Practice Hours: \_\_\_\_\_ (refer to Table H)

Position: \_\_\_\_\_ (refer to Table I)

Place of Employment: \_\_\_\_\_ (refer to Table J)

**Tertiary Employer (if applicable):** \_\_\_\_\_

Employment Category: \_\_\_\_\_ (refer to Table G of the **attached CODE TABLE** to make any changes)

Range of Estimated Weekly Practice Hours: \_\_\_\_\_ (refer to Table H)

Position: \_\_\_\_\_ (refer to Table I)

Place of Employment: \_\_\_\_\_ (refer to Table J)

**PRACTICING LICENCE STATEMENT AND DECLARATION:**

As a registered pharmacist under the provisions of The Pharmaceutical Act of the Province of Manitoba, I hereby make application for a Licence to practice the profession of a pharmacist in the Province of Manitoba **until the 31<sup>st</sup> day of December, 2011.**

I declare that I am  I am not  under suspension or investigation by a professional regulatory body governing the practice of pharmacy in Canada or elsewhere.

By signing this application, I understand that it is a confirmation of information as listed on this entire application.  
**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**PRACTICING LICENCE FEE: UNIVERSITY ASSESSMENT OF \$100.00 AND MPHA FEE (INCL. NAPRA) \$671.58:**

If Licensing between Jan and June 30/11	If Licensing between Jan and June 30/11 <small>(discounted fee for using cash, cheque or debit)</small>	If Licensing between July 1 and Dec 31/11	If Licensing between July 1 and Dec 31/11 <small>(discounted fee for using cash, cheque or debit)</small>
771.58	\$749.10	\$502.95	\$489.46
\$ 38.58 GST	\$ 37.46 GST	\$ 25.15 GST	\$ 24.47 GST
<b>\$810.16</b>	<b>\$786.56</b>	<b>\$528.10</b>	<b>\$513.93</b>

**PAYMENT MUST ACCOMPANY APPLICATION.....ALL FEES ARE NON-REFUNDABLE** GST# R107660664

- Cheque: (Payable to: The Manitoba Pharmaceutical Association)
- Interac (made at the MPhA Office)
- VISA or MasterCard Number: \_ \_ \_ \_ / \_ \_ \_ \_ / \_ \_ \_ \_ / \_ \_ \_ \_
- Expiration Date: \_\_\_\_\_
- Name of Cardholder: \_\_\_\_\_
- Signature of Cardholder: \_\_\_\_\_

**For Office Use Only:**

Licence #: \_\_\_\_\_ Code: \_\_\_\_\_

Payment: Y BY: S EMP

Date Issued: \_\_\_\_\_

.....PLEASE SEE OVER.....



## CODE TABLES

**A**

PROVINCE/TERRITORY	
NL	Newfoundland and Labrador
PE	Prince Edward Island
NS	Nova Scotia
NB	New Brunswick
QC	Québec
ON	Ontario
MB	Manitoba
SK	Saskatchewan
AB	Alberta
BC	British Columbia
YT	Yukon Territory
NT	Northwest Territories
NU	Nunavut

**B**

COUNTRY
ISO Country Codes

**C**

BASIC EDUCATION	
10	Diploma
20	Baccalaureate
30	Master's
35	PharmD
97	Not Collected
99	Unknown

**D**

POST-BASIC EDUCATION	
20	Baccalaureate
30	Master's
35	PharmD
40	Doctorate
50	Accredited Residency
98	Not Applicable
99	Unknown

**E**

CANADIAN UNIVERSITY	
59001000	University of British Columbia
48001000	University of Alberta
46005000	University of Manitoba
35015000	University of Toronto
24003000	Université de Montréal
24005000	Université Laval
12004000	Dalhousie University
10001000	Memorial University of Newfoundland
47005000	University of Saskatchewan
35017000	University of Waterloo

**F**

EMPLOYMENT STATUS	
12	Employed in the Profession of Pharmacy
22	Employed in Other Than the Profession of Pharmacy, Seeking Employment in the Profession of Pharmacy
32	Employed in Other Than the Profession of Pharmacy, Not Seeking Employment in the Profession of Pharmacy
42	Unemployed and Seeking Employment in the Profession of Pharmacy
52	Unemployed and Not Seeking Employment in the Profession of Pharmacy
99	Unknown

**G**

EMPLOYMENT CATEGORY	
10	Permanent Employee
20	Temporary Employee
30	Casual Employee
40	Self Employed
98	Not Applicable
99	Unknown

**H**

ESTIMATED WEEKLY PRACTICE HOURS	
10	40 and Above
20	30-39
30	15-29
40	14 or Less
98	Not Applicable
99	Unknown

**I**

POSITION	
12	Director of Pharmacy
14	Pharmacy Owner/Manager
16	Pharmacy Manager
22	Institutional Leader/Coordinator
32	Staff Pharmacist
34	Pharmacist Consultant
40	Educator
50	Researcher
56	Industrial Pharmacist
60	Other
98	Not Applicable
99	Unknown

**J**

PLACE OF EMPLOYMENT	
012	Hospital and Other Health Care Facilities
022	Community Pharmacy
026	Other Pharmacy
032	Group Professional Practice/Clinic
060	Community Health Centre
062	Other Community-Based Pharmacist Practice
100	Post-Secondary Educational Institution
120	Association/Government/Para-Governmental Health-Related
122	Industry/Manufacturing/Commercial
124	Community Pharmacy Corporate Office
140	Other
997	Not Collected
998	Not Applicable
999	Unknown

Retail setting where drugs and related products are distributed primarily through direct face to face client contact.

Setting in which retail drugs and related products are distributed for clients through other than direct face to face client contact.

Pharmacist practice, not otherwise classified, that focuses on the delivery of onsite or offsite community-based, direct-client-care, pharmacy services.