



eLicense Guide: Submitting Additional Documentation

Updated 4-23-2018

If you need help logging in, registering, creating an account, or have any other technical issues with eLicense Ohio, please call the eLicense Customer Service Center at 855-405-5514, Monday-Friday, 8:00am to 5:00pm.

To submit additional documentation, you must access the portal using the eLicense system at <https://elicense.ohio.gov/>

Once you navigate to the main page, click on the button over the picture that says: **“LOG IN, CREATE YOUR ACCOUNT.”**



If this is your **FIRST TIME** using the new eLicense Ohio portal, you will need to register your contact information. To do so, follow the instructions in **PART A** and **PART B** of this guide.

If you have **ALREADY** created an account, follow the instructions in **PART B** of this guide.

PART A: CREATING AN ACCOUNT FOR AN EXISTING BOARD OF PHARMACY LICENSE

If you have an existing license with the Board of Pharmacy, select “I HAVE A LICENSE.” If you are seeking to apply for a new license, select “I DON’T HAVE A LICENSE” and follow the instructions.

New Users

Create a New Account

Register here for a new eLicense.Ohio.gov account.

If you currently have a license or previously applied for a license or certificate in Ohio and do not have a login through this portal, please select “I have a License”.

If you currently do not have a license or have not previously applied for a license or certificate in Ohio, please select “I don't have a License”.

I HAVE A LICENSE **I DON'T HAVE A LICENSE**

Do you need help registering? [Click here](#)

To register your existing license with the system, you will need **your social security number** and the **security code** provided to you by the Board of Pharmacy.

You can retrieve your security code by clicking the blue button next to the security code field, but it can only be sent to email address on file with the Board of Pharmacy.

Existing License

Register here for a new eLicense.Ohio.Gov account associated with your existing Ohio professional licenses. In the event you do not have the required security code, click the 'Obtain Security Code' button.

Your social security number is required for accurate identification under federal and state child support enforcement law (42 U.S.C. §666 and §3123.50, O.R.C.)

Need help registering? [Click here](#)

* Social Security Number I don't have a Social Security Number

* Security Code **OBTAIN SECURITY CODE**

* Date of Birth

After registration, you will then be directed to your dashboard and can continue on following **PART B** of this guide.

PART B: SUBMITTING ADDITIONAL DOCUMENTATION

After logging in, you will be directed to your eLicense Dashboard.

From your license tile, select options, then select **SUBMIT ADDITIONAL DOCUMENTATION**.

Welcome to your eLicense Dashboard




[+ APPLY FOR A NEW LICENSE](#) [MY HISTORY](#)

Are you looking to apply for a new business license? First, add your business by clicking here before applying.

Your Licenses

To renew, edit, or update your license, please click on the Options button. Applications for a license are also shown on the bottom of the dashboard page.

SORT BY ▾

	Board of Pharmacy Pharmacist 012345678 Board of Pharmacy	ACTIVE	EXP DATE 9/15/2018	OPTIONS ▾
	Board of Pharmacy Pharmacy Intern - Graduate 06000010 Board of Pharmacy	ACTIVE	EXP DATE 9/15/2018	OPTIONS ▾
	Board of Pharmacy Terminal - Non-Resident Pharmacy - Category 2 0240000003 Board of Pharmacy	ACTIVE	EXP DATE 3/31/2019	OPTIONS ▾ <ul style="list-style-type: none">RenewReinstateChange AddressChange NameDuplicate Wall CertificateLicense InactivationManage AffiliationsSend License VerificationSubmit Additional Documentation

A red arrow points to the 'Submit Additional Documentation' option in the dropdown menu.

Next, fill out all required fields and select **SAVE AND UPLOAD DOCUMENTS**

Additional Documentation


Submit Additional Documentation

Enter the reason for your submission of additional documentation in the text box to the right. Then click 'Save and Upload Documents'.

License Number
012345678

License Type
Pharmacist

* Reason for Submitting Additional Documentation Request


CANCEL **SAVE AND UPLOAD DOCUMENTS** 

Upload required documentation by selecting **UPLOAD**.

Additional Documentation

Submission List for this service request


Please either upload an electronic copy of the documents by clicking the 'Upload' button, or Acknowledge that you or the appropriate third party will send the documents to the Board by clicking the 'Acknowledge' button. If uploading an attachment as a submission, it is necessary that the name of the file attachment is less than 80 characters in length for it to be received successfully. The character limit does include the file attachment extension, such as (.doc) and (.pdf).

Action	Title	Description	Acknowledge	Uploads	Complete
 <input type="button" value="Upload"/>	Submit Additional Documentation	Submit Additional Documentation			

Select **CHOOSE FILE** and select your document.

Submission List for this service request

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Action	Title	Description	Acknowledge	Uploads	Complete
Change Name  <input type="button" value="Choose File"/>		No file chosen			

Once file is selected and uploading is complete, select **SUBMIT**

Submission List for this service request

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Action	Title	Description	Acknowledge	Uploads	Complete
Upload	Change Name	Accepted Documents: Driver's license, State ID, Marriage Certificate, Divorce/Dissolution Decree, other court order approving name change or US Immigration & Citizenship Services issued Green Card. Submit change document within 30 days of name change.		fest.png	

CANCEL **SUBMIT**

You will be directed to the Service Request Submitted Screen. This is your confirmation that the request was submitted.

Service Request Submitted

Thank you for submitting a service request! Your service request Id is: **SR-072270**

We will address your request as soon as possible!

DONE

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