



**STATE OF  
OHIO**  
BOARD OF PHARMACY

## eLICENSE GUIDE: SUBMITTING ADDITIONAL DOCUMENTATION

Updated 4-23-2018

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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.

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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.

77 South High Street, 17th Floor, Columbus, Ohio 43215

T: (614) 466.4143 | F: (614) 752.4836 | [contact@pharmacy.ohio.gov](mailto:contact@pharmacy.ohio.gov) | [www.pharmacy.ohio.gov](http://www.pharmacy.ohio.gov)



## **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**

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**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**

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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 <b>Pharmacist</b> 012345678   Board of Pharmacy	ACTIVE	EXP DATE 9/15/2018	OPTIONS ▾
	Board of Pharmacy <b>Pharmacy Intern - Graduate</b> 06000010   Board of Pharmacy	ACTIVE	EXP DATE 9/15/2018	OPTIONS ▾
	Board of Pharmacy <b>Terminal - Non-Resident Pharmacy - Category 2</b> 0240000003   Board of Pharmacy	ACTIVE	EXP DATE 3/31/2019	OPTIONS ▾ <ul style="list-style-type: none"><li>Renew</li><li>Reinstate</li><li>Change Address</li><li>Change Name</li><li>Duplicate Wall Certificate</li><li>License Inactivation</li><li>Manage Affiliations</li><li>Send License Verification</li><li>Submit Additional Documentation</li></ul>

A red arrow points to the 'Submit Additional Documentation' option in the dropdown menu for the 'Terminal - Non-Resident Pharmacy - Category 2' license.

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).

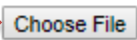
Action	Title	Description	Acknowledge	Uploads	Complete
	Submit Additional Documentation	Submit Additional Documentation			

CANCEL      SUBMIT

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		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 	



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!

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