



Technician Trainee - High School Registration Verification

This form must be submitted with a technician trainee application for those applicants who are seventeen or older that are currently enrolled in a career-technical school program that is approved by the Board. A list of approved high school programs can be accessed [here](#).

UPLOAD INSTRUCTIONS: This form must be uploaded during the pharmacy technician trainee application in place of a high school diploma. Detailed instructions for applicants enrolled in a career-technical school program can be accessed [here](#).

Part I – Pharmacy Technician Trainee Applicant Information

Applicant Name	Date of Birth
E-mail Address	Contact Phone

Part II – Approved High School Career Technical

Name of Approved Program (select from drop down)	Name of Program Director
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Part III – Attestation – To be signed (in wet-ink) by the Program Director.

I DECLARE UNDER PENALTIES OF FALSIFICATION AS SET FORTH IN CHAPTERS 2921. AND 4729. OF THE OHIO REVISED CODE THAT THE APPLICANT LISTED IN PART I OF THIS FORM IS ENROLLED OR WILL BE ENROLLING IN AN HIGH SCHOOL PHARMACY TECHNICIAN TRAINING PROGRAM APPROVED BY THE BOARD PURSUANT TO RULE 4729:3-3-02 OF THE OHIO ADMINISTRATIVE CODE.

I FURTHER ACKNOWLEDGE THAT THE APPLICANT LISTED IN PART I OF THIS FORM IS AT LEAST AGE SEVENTEEN YEARS OR OLDER.

Program Director Signature	Date Signed
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Printed Name

