Stamps Health Services Pharmacy Volunteer/Employee Program

Applicant Requirements

All potential volunteers must submit a Volunteer Program Application to the Pharmacy Manager. Once the Pharmacy Manager reviews the applications, interviews will be conducted. Upon an offer by the Pharmacy Manager to participate in the Pharmacy Volunteer Program, applicants must complete the process of registering as a pharmacy technician with the Georgia Board of Pharmacy. The registration procedure can be located online at www.gbp.georgia.gov.

Applicant agrees to the following volunteer requirements:

- Wants to pursue a career in a medical/health care related field
- A minimum of a 2.5 GPA, and be in good standing with the Institute
- Volunteer a minimum of two consecutive semesters in the pharmacy department
- Able to commit to 3 hour shifts at least twice a week
- Able to commit to a set schedule each semester depending upon the student’s availability and the pharmacy need
- Submit the Volunteer Program Application to the pharmacy or Pharmacy Manager
- Interview with the Pharmacy Manager prior to program acceptance
- Complete the Georgia Board of Pharmacy Technician registration
- Complete required training modules prior to working in the pharmacy department (HIPAA, Combat Meth, Student Training Manual)

The registration requirements for the Georgia Board of Pharmacy are as follows:

- Complete the Pharmacy Tech Application located at www.gbp.georgia.gov along with a $100 non-refundable application fee
- Complete the Citizenship/Qualified Alien Status form if necessary
- Complete the Fingerprint Background Check through GAPS/Cogent ($30 fee)
- The pharmacy license number for our pharmacy is PHRE005743

The Volunteer Program is a rolling process, so applications may be turned in at anytime during the year. Typically, volunteers will start in the pharmacy at the beginning of Summer semester. This time frame may be altered if there are open positions during other semesters. Because the success of the Pharmacy Volunteer Program depends on your commitment, please only apply if you are willing to honor your commitment to the department and your fellow volunteers. In turn, applicants will be able to gain a more intimate knowledge of retail pharmacy processes and interact with a variety of healthcare providers.

Please complete the following application and return it to Nina Thoman, PharmD, RPh, via email (nina.thoman@health.gatech.edu) OR hard copy (Stamps Health Services Pharmacy, 740 Ferst Drive).
Pharmacy Volunteer Program Application

Name: __________________________________________________________

GTID: ______________________________________

Phone Number: __________________________

Major: ______________________________________

Pre-Health Career Focus: __________________________________________

Year in School: ___________________  Graduation Year: __________________

Please give a brief explanation of your interests in the field of Pharmacy, and why you would like to be considered for a volunteer position:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

By signing below, you agree that you have read and are able to follow the applicant requirements.

Signature: ___________________________   Date: ___________________________