



OKLAHOMA STATE BOARD OF PHARMACY
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Approval status box containing DENIED, APPROVED, and APPROVAL #:

APPLICATION FOR EVALUATION OF CONTINUING EDUCATION

All programs to be evaluated must be submitted with supporting documentation for the program. This documentation must include the following:

Table with 2 columns: Documentation type (Agenda with hours & dates, Learning objectives, Certificate of Completion) and Pre-Approval status (Yes/No).

\*Any application missing the supporting documentation will be automatically returned\*

- Non-Live programs must be accompanied by a post-program test or evaluation.
After the course has been evaluated by the CE Committee, this form will be returned via email to the person designated below.

1. Individual submitting program for evaluation:
2. Email address to send evaluation form:
3. Name of Sponsoring Individual or Organization:
4. Title of program:
5. Date of Program: 6. Time of Program:
7. Estimated CE Contact Time:
8. Program Objectives:
9. Type of Course (i.e. Live, Correspondence, Webinar, etc.):
10. Proof of Attendance or Completion:
11. Special Request(s):

- CE SPONSORS MUST PROVIDE A CERTIFICATE OF ATTENDANCE/COMPLETION TO EACH PARTICIPANT.
SPONSORS: ALL MATERIALS USED, PLUS A LIST OF PARTICIPANTS RECEIVING COMPLETION CERTIFICATES, MUST BE RETAINED BY THE SPONSOR FOR FOUR (4) YEARS.

FOR BOARD USE ONLY:

Date of Evaluation:
This program has been evaluated and is approved for hours of CE credit.

(Initials of CE Committee Members) (Signature of Evaluator)

Remarks: