

LCB File No. R122-04

**PROPOSED REGULATION OF THE
STATE BOARD OF PHARMACY**

~~[NAC 639.217 Application for inactive status. (NRS 639.205)~~

~~—1. An application for inactive status must contain the following:~~

~~—(a) The name, address and telephone number of the applicant.~~

~~—(b) A concise statement of the reasons the applicant requests to be placed on inactive status.~~

~~—(c) If the application is based on a medical disability, a copy of each medical report or opinion supporting the claim of a medical disability, including but not limited to, the name, address and telephone number of each practitioner who has treated the applicant.~~

~~—(d) The number of the applicant's certificate of registration to practice pharmacy in this state and the date on which the certificate was issued.~~

~~—2. Additional information may be requested by the Board as it considers necessary.~~

~~—3. Upon receipt of a completed application which is based on a medical disability, the Board will place the application on the agenda for its next regularly scheduled meeting.~~

~~—4. An applicant is not required to appear at the meeting of the Board unless he is requested to do so by the Board.]~~