

SOUTH DAKOTA BOARD OF PHARMACY

Intern

User Guide and Renewal Application Instructions

Valid through 7/31/2024



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Intern Renewal Application

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General Information

Intern Renewal Application General Information

1. Registration will expire September 30 each year. There is no grace period.
2. For current South Dakota Statutes and Rules pertaining to interns , go to <https://doh.sd.gov/boards/pharmacy/>, under Quick Links, see law book link options.
3. There is no renewal fee for intern registrations.

You must complete the entire renewal application process from start to finish in one sitting

1. Online system does not retain information entered until the application has been submitted and payment process is completed.
2. This platform does not support the use of a mobile phone.
3. If a tablet is being used, it must be Microsoft based. (Not an Apple product.)
4. Have all your personal information (DOB, SSN, college name, expected graduation date) ready prior to beginning application.
5. Have NABP e-Profile number.

Required Documents to be Uploaded

1. Intern Certification of Eligibility needs to be completed and signed by your faculty representative. The document can be found at <https://doh.sd.gov/licensing-and-records/boards/pharmacy/licensing-requirements/pharmacy-interns/>
 - a. You may need to copy this link and paste it into your browser.

After Application Submission Information

After your renewal application has been submitted, your registration will auto renew.

After the license has renewed, you will be able to do the following:

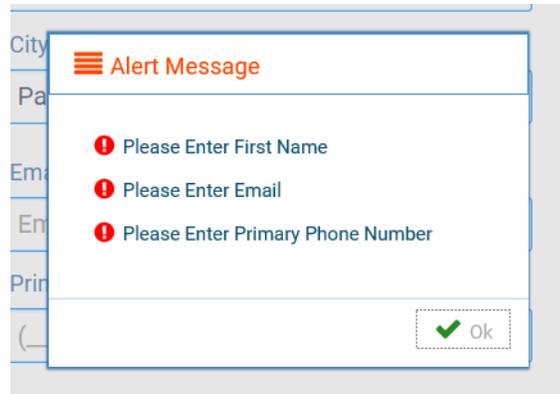
1. Print intern registration (instructions on page 6, Item 8b).
2. Print a payment receipt (instructions on page 7, Item 8f).
3. In your account on the My Profile page, you can also update your personal information at any time.
 - a. Please use this platform to update your personal address, phone number, and email as changes occur.

Licensure status can also be verified at:

1. Verification page: https://sdbop.igovsolution.net/online/Lookups/Lookup_Individual.aspx

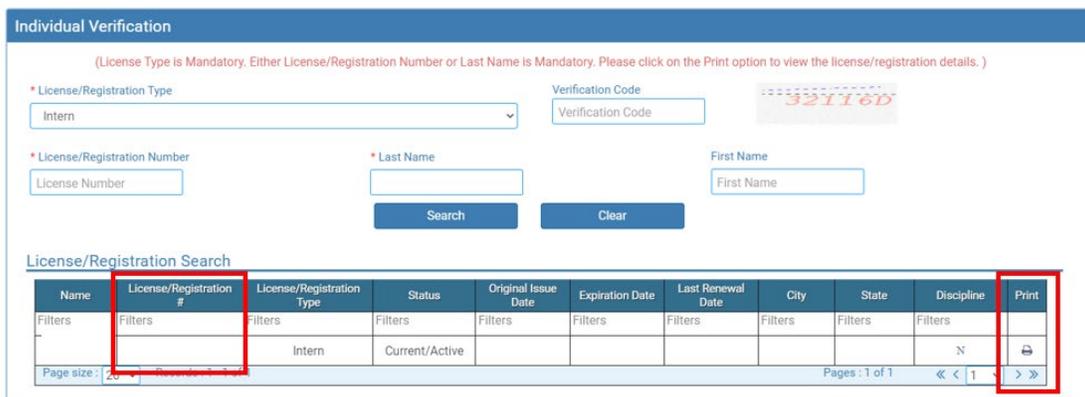
General Notes

1. Mandatory fields are marked with a red * in all screens and all those must be entered before clicking on next.
2. Click on Next button to go to the next screen or click on Previous button to go back to the previous screen.
3. If mandatory fields are not entered, you will get an alert message to enter missing information.



Account Set Up

1. **If this is the first time this license has been renewed**, start with item #3 below.
2. **If this is *not* the first time this license has been renewed**, skip to page 8, and enter your username and password used in a previous renewal.
3. Verify your license number at this link: https://sdbop.igovsolution.net/online/Lookups/Lookup_Individual.aspx.
 - a. License/Registration Type: select intern.
 - b. Verification code: enter the code to the right of this box.
 - c. Last Name: Enter your last name.
 - d. Click search.
 - e. License/Registration Search: if the license has been issued, results will appear at the bottom of the page in this section.
 - i. Under the print column, click on the print icon to print a copy of the verification.
 - f. **Retain license number to set up online Profile.**

A screenshot of the "Individual Verification" web form. The form has a blue header with the title "Individual Verification" and a red note: "(License Type is Mandatory. Either License/Registration Number or Last Name is Mandatory. Please click on the Print option to view the license/registration details.)". Below the header are several input fields: "License/Registration Type" (a dropdown menu with "Intern" selected), "Verification Code" (a text box with "32116D" visible), "License/Registration Number" (a text box), "Last Name" (a text box), and "First Name" (a text box). There are "Search" and "Clear" buttons below these fields. Below the form is a "License/Registration Search" section with a table. The table has columns: Name, License/Registration #, License/Registration Type, Status, Original Issue Date, Expiration Date, Last Renewal Date, City, State, Discipline, and Print. The first row of data shows "Intern" under License/Registration Type and "Current/Active" under Status. The "Print" column contains a printer icon. Red boxes highlight the "License/Registration #" and "Print" columns. At the bottom, there is a "Page size" dropdown and "Pages: 1 of 1" with navigation arrows.

4. Click on this link (**Bookmark this page**): https://sdbop.igovsolution.net/online/User_login.aspx
5. **User Login** page.
 - a. After confirming your license/registration number, begin setting up your account by clicking on this link: https://sdbop.igovsolution.net/online/User_login.aspx
 - b. Click on Sign up as shown below:

ONLINE BUSINESS PROFILE LOGIN

User Login

Individual Business

User Name

Password

 [Forgot password](#)

6. **Registration** page.
 - a. Click on Individual at the top (see snip on top of next page).
 - b. License Type: select intern from drop-down menu.
 - c. License number: Put in your license/registration number from the verification done in item #1.
 - i. Include the 'I-' prior to your license/registration number.
 - d. Date of Birth: enter your date of birth in the format of MM/DD/YYYY.
 - e. Click Next.

ONLINE PROFILE REGISTRATION

RegistrationStep 1 / 2

Individual Business

Please provide the information below.
[Click here to verify your license #.](#)

* License Type

* License Number

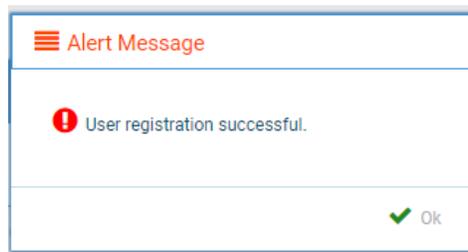
* Date of Birth

[? Forgot Password](#)

7. **Credentials** page. Complete this information.
 - a. ***Retain this information for future reference and use – this information will be used to renew your license.***
 - b. Email: enter a valid email.
 - c. Confirm Email: enter the same email as entered in item #4b.
 - d. User Name: enter your user name.
 - e. Password: enter a password. There is not a specified format for the password.
 - f. Confirm Password: enter same password as used in item #4e.
 - g. Click Submit.

The screenshot shows a web form titled 'Credentials' with a sub-header 'Step 2 / 2'. The form contains five required input fields, each with an asterisk: 'Email', 'Confirm Email', 'User Name', 'Password', and 'Confirm Password'. Below the fields are two buttons: 'Previous' on the left and 'Submit' on the right.

8. Registration is successful when this alert message appears.
 - a. Click OK.
 - b. You will be returned to the log in page.



9. **ONLINE PROFILE LOGIN** page.
 - a. Once account is set up, you will return to the log in page or use this link:
https://sdbop.igovsolution.net/online/User_login.aspx
 - b. Individual: click box by Individual at the top.
 - c. User Name: enter your user name.
 - d. Password: enter your password.
 - e. Click Login.

The screenshot shows a web form titled 'User Login'. At the top, there are two radio buttons: 'Individual' (selected) and 'Business'. Below this are two input fields: 'User Name' and 'Password'. A blue 'Login' button is centered below the fields. At the bottom, there are two links: 'Sign up' with a person icon and 'Forgot Password' with a magnifying glass icon.

My Profile Page

Once logged into your online account, the My Profile page is available.

10. MY PROFILE page.

a. Personal Information section.

- i. This is not an editable section.
- ii. Your first name, middle name, and last name appears here.

Personal Information

First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

b. Registration Information section.

- i. This is not an editable section.
- ii. License/registration information appears in this section including type of license/registration, license number, issue date, expiration date, status of license/registration, and last renewal date.
- iii. Renewal column.
 1. When renewal period is open, click on the blue renew to begin renewal of license.
 2. Please refer to the renewal manual for complete instructions and all information needed.
- iv. Certificate column. **Print license/registration from this column.**
 1. Click on the blue print in the column to print a pdf of your license/registration.

Registration Information

Type	License #	Issue Date	Exp Date	Status	Last Renewal Date	Renewal Certificate
Filters	Filters	Filters	Filters	Filters	Filters	
				Current/Active		Renew Print

c. Home Address section.

- i. This is an editable section.
- ii. Your home address, zip code, city, state, and county appear here.

Home Address

Edit		
* Address	Address Line 2	Address Line 3
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country	* Zip	* City
<input type="text" value="Select Country"/>	<input type="text"/>	<input type="text" value="!"/>
* State	County	
<input type="text"/>	<input type="text"/>	

- iii. To update this section, click on the edit button.
 1. Update the necessary information.
 2. Once complete, click save.

d. **Personal Phone, Email and Fax section.**

- i. This is an editable section.
- ii. Your phone number, alternate phone number, email, and fax number appear here.

Personal Phone, Email and Fax Edit

* Phone #	Alternate Phone	* Email
<input type="text"/>	<input type="text"/>	<input type="text"/>
Fax		
<input type="text"/>		

- iii. To update this section, click on the edit button.
 - 1. Update the necessary information.
 - 2. Once complete, click save.

e. **Document Details section.**

- i. This section contains all the documents uploaded as part of the initial or renewal application.
- ii. This section can be used if the licensee would like to upload any additional documents outside of the renewal time period.
- iii. To upload a document:
 - 1. Document type: select type of document from the drop-down list.
 - 2. Use the attach document to select/browse the file from the local folder.
 - 3. Then click on the Upload document.
- iv. Any documents that are uploaded/showing in this Documents Details section can also be downloaded.
- v. Intern Hour Supportive Document.
 - 1. If you have submitted intern hours to the Board and hours have been processed, a document with the title Intern Hour Supportive Document will be available for you to download.
 - 2. This will confirm the number of hours on file with the Board.

Document Details

Documents for the application need to be uploaded during application process. Only use this section for additional documents that are requested outside of application process.
Board of Pharmacy may upload documents here for user visibility.

Document Type: Documents:

Date	Document Type	File Name	User	Download
Filters	Filters	Filters	Filters	
06/28/2021	Initial Application	Initial Application		
06/28/2021	Intern Eligibility Form	Intern Certification of Eligibility Form		
06/28/2021	Photos	Current Photo		

f. **Payment History section.**

- i. This section contains payments made for licensure.
 - 1. Fields include receipt #, payment method, date received, payer, amount, and print receipt.
- ii. To print a receipt, click on the printer in the receipt column for the receipt needed.

Payment History

Receipt #	Payment Method	Date Received	Payer	Amount	Receipt
Filters	Filters	.irs	Filters	Filters	
	Credit Card			\$40.00	

Page size: 20 Records: 1 - 1 of 1 Pages: 1 of 1

g. **Renewal Details** section.

- i. This section contains status information of your renewal application.
 - 1. If licensure is Pending (not yet renewed) or if it has been Cleared (renewed).
 - 2. If it's Cleared, then in the Registration information grid will show the updated license expiration date, Last renewal date.
- ii. Print your online submitted Renewal form, if needed, by clicking on the printer in the print column.

Renewal Details

Order ID	License Number	Renewal Date	Status	E-Signature	Print
Filters	Filters	Filters	Filters	Filters	

Page size: 20 Records: 1 - 0 of 0 Pages: 1 of 0

Start Renewal Application Process Here

Start here if a log in (user name and password) was previously established.

- 1. Click on the link for initiating an renewal Intern Registration: https://sdbop.igovsolution.net/online/User_login.aspx.
 - a. **Please bookmark this page.**
- 2. **MY PROFILE** page.
 - a. After validating all the information in the My Profile section, click on the blue Renew in the Renewal column in the registration Information section.

Registration Information

Type	License #	Issue Date	Exp Date	Status	Last Renewal Date	Renewal	Certificate
Filters	Filters	Filters	Filters	Filters	Filters		
Intern				Current/Active		Renew	Print

- b. After clicking on the Renewal icon, click on the Confirmation Message.
 - i. Click Yes to continue.

Confirmation Message

By continuing to renew my license/registration, I affirm that I have reviewed all the sections of my profile and the information in my profile is accurate.

Yes No

- 3. **INTERN RENEWAL REGISTRATION INSTRUCTIONS** page.
 - a. Below page will open with a link to the instructions.
 - b. Click Next to continue.

INTERN RENEWAL REGISTRATION INSTRUCTIONS

For application information and instructions, please go to this link: <https://doh.sd.gov/boards/pharmacy/intern.aspx>

4. **INTERN INFORMATION** page.

- a. Complete information that has a red asterisk (*).
- b. Gender: select one of the options.
- c. Name of College of Pharmacy: select college of pharmacy you are attending from the drop-down list.
 - i. If attending South Dakota State University, select 63—South Dakota State U – SD.
- d. Current Professional Year: select your professional year or FPEGC.
- e. Anticipated Year of Graduation: fill in the anticipated date of graduation.
- f. NABP e-profile ID. This is a required field.
- g. When completed, click Next.

INTERN INFORMATION

First Name Middle Name Last Name

Maiden Name

Mailing Address

Address1 Address2 Address3

Zip City State

Email Date of Birth Primary Number

Alternate Number

Gender Female Male

Name of College of Pharmacy
Select College

PROFESSIONAL YEAR

Please select your current year (select one)

Current Year: P2 P3 P4 FPEGC

Anticipated Year of Graduation (MM/DD/YYYY)

NABP e-profile ID

Previous Next

5. **CERTIFICATION OF ELIGIBILITY FOR DOCTOR OF PHARMACY CANDIDATES** page.

- a. Intern Certification of Eligibility Form: click on Attach Document to upload the completed Intern Certification of Eligibility Form.
- b. Click Next to continue.

CERTIFICATION OF ELIGIBILITY FOR DOCTOR OF PHARMACY CANDIDATES

Complete the Certification of Eligibility for Doctor of Pharmacy Candidates form. Your faculty representative at the accredited college of pharmacy your attend needs to sign, date, and properly completed all information.

Intern Certification of Eligibility Form

Attach Document

Previous Next

6. **APPLICATION INPUT PREVIEW** page.

- a. Review your information that has been input.
 - i. If there are any changes needed, click on previous to correct any information.
 - ii. If there are no changes, click Next.

APPLICATION INPUT PREVIEW

INTERN RENEWAL REGISTRATION INSTRUCTIONS

For application information and instructions, please go to this link: <https://doh.sd.gov/boards/pharmacy/intern.aspx>

INTERN INFORMATION

First Name Middle Name Last Name

Maiden Name

Mailing Address

Address1 Address2 Address3

Zip City State

Email Date of Birth * Primary Number

7. **AFFIRM AND SUBMIT** page.

- a. Read each statement then click each box by each statement.
- b. E-Signature: enter your name as your e-signature.
- c. Click Submit.

AFFIRM AND SUBMIT

* I, the undersigned, do hereby apply to the South Dakota State Board of Pharmacy for registration as a Pharmacy Intern, as provided in the rules of the South Dakota State Board of Pharmacy.

* I understand that as a Registered Pharmacy Intern I may not perform any of the duties required of a registered pharmacist except when I am working under the continuous and personal supervision of a registered pharmacist and that my duties may not exceed those in guidelines provided by the Board.

* I also understand that should I perform any duties which I am not licensed to perform, or which exceed my educational level or if I falsely assume to be a pharmacist, or engage in any activity considered to be unprofessional conduct, I am placing my privilege of becoming a licensed pharmacist in South Dakota in jeopardy.

* I further understand that I must submit records of my internship experience on forms provided by or prescribed by the Board and that credit for internship experience will not be granted unless registration and forms describing internship experience are completed and submitted to the Board in a timely manner.

* I also understand that I am required to notify the Board within 10 days of a name or address changes while I am registered as an Intern. Complete a change form found at this link: <http://doh.sd.gov/boards/pharmacy/intern.aspx>.

* I agree to abide by the South Dakota pharmacy law and the rules of the Board of Pharmacy. I declare and affirm under the penalties of perjury that this application has been completed by me, electronically signed by me, and to the best of my knowledge and belief, is in all things true and correct.

* E-Signature Date

Please note that after you click the Submit button, you cannot make changes to your application.

- d. If submission was successful, you will see a confirmation dialog box with a message indicating that your application was submitted successfully. Click OK.

Alert Message

Your application has been successfully submitted. Your confirmation is 20190729000002174

Ok

8. **PRINT APPLICATION** page.

Helpful hint: Click on My Profile to return to page where you can print your registration – see item 10b on page 6.

- a. When application has been submitted, the application can be printed by clicking on the printer button on the Print Application line.
- b. By clicking on My Profile in the upper right corner, you will return you to your My Profile page as described in beginning with item #10b on page 6.

South Dakota Board of Pharmacy INTERN REGISTRATION LICENSING RENEW My Profile

Print Application

South Dakota Board of Pharmacy INTERN REGISTRATION LICENSING RENEW

INTERN RENEWAL REGISTRATION INSTRUCTIONS

For application information and instructions, please go to this link: <https://doh.sd.gov/boards/pharmacy/intern.aspx>

INTERN INFORMATION

First Name: BREANNA Middle Name: R Last Name: ATTEMA

Maiden Name:

Mailing Address:

Address? Address? Address?

Please note that after you click the Submit button, you cannot make changes to your application.

TROUBLE SHOOTING AND OTHER TIPS

I'm having trouble getting through the licensing process.

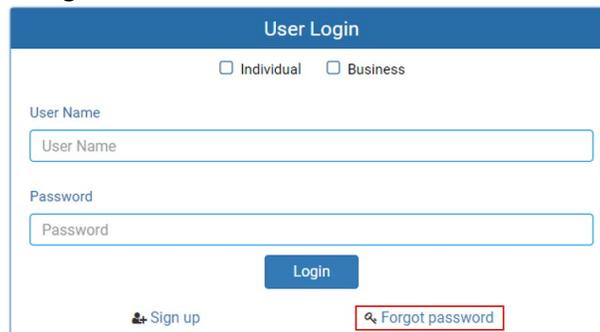
1. Try a different browser. Example: If you've tried Internet Explorer, switch to Google Chrome.
2. This platform does not support the use of a mobile phone.
3. If a tablet is being used, it must be Microsoft based. (Not an Apple product.)
4. Be sure your pop-up blocker is turned off.
5. Firewalls or anti-malware protections on your system may be preventing the ability to get through the licensing process.

Tips

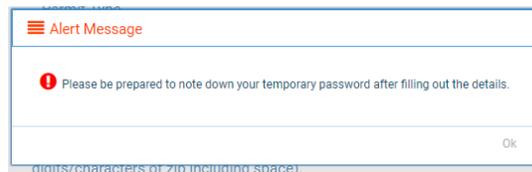
1. PDF documents are the preferred type of documents for required uploads.
2. Only upload documents during the licensing process. **DO NOT UPLOAD** on the MyProfile page for a new or renewal application.
3. At the top of your licensure documentation, if it includes 'This is a Primary Source Verification' – **NOTE: THIS IS NOT YOUR LICENSE.** Refer to item #10b on page 6 to see how to print your registration.
4. In your account on the My Profile page, you can also update your personal information at any time.
 - a. Please use this platform to update your personal address, phone number, and email as changes occur.

Reset Password

1. At the **User Login** page, click on Forgot Password.



2. Upon advancing to the next page, an alert message pops up.
 - a. **PLEASE NOTE THIS:** *Please be prepared to write down your temporary password after filling out the details.*
 - b. Click OK.



3. **Password Recovery Page**

- a. Select Individual at the top.
- b. License type: select Intern from the drop-down menu.
- c. License number: enter your license number.
- d. Date of Birth: enter your date of birth in MM/DD/YYYY format.
- e. Click Next.



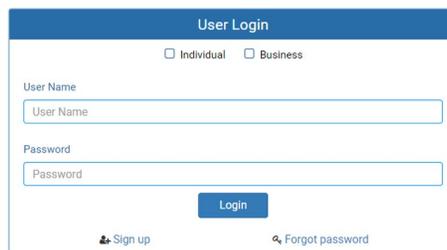
4. An Alert message will appear. **BE SURE TO RETAIN THIS PASSWORD.**

- a. *Helpful hint:* open a word document, then copy/paste the temporary password into the word document.
- b. Once the temporary password has been written down, Click OK.



5. Return to the **User Login** page.

- a. Select Individual at the top.
- b. User Name: enter your User Name.
- c. Password: Input the temporary password from the Alert Message.
- d. Click Log In.



6. **Credentials** Page

- a. Old Password: Enter your temporary password from the Alert Message as the Old Password.
- b. New Password: enter a new password.
- c. Confirm the New Password: enter your new password.
- d. Click Submit.
- e. You will return to the log in page.
- f. Enter the User name and new password to continue.

