



BOARD OF PHARMACY

New Mexico Regulation and Licensing Department
BOARDS AND COMMISSIONS DIVISION
5200 Oakland Avenue, NE ▪ Suite A ▪ Albuquerque, New Mexico 87113
(505) 222-9830 ▪ Fax (505) 222-9845 ▪ (800) 565-9102
www.RLD.state.nm.us/boards/Pharmacy.aspx

REPORT CHANGE of ADDRESS/EMPLOYMENT FOR INDIVIDUALS

New Mexico Board of Pharmacy (NMBOP) requires changes in home address or employment to be reported in written form within 10 days. A Pharmacist-In-Charge (PIC) change must be reported immediately to the NMBOP. PIC changes must then be reported in writing to the NMBOP within 10 days. Please do not report PIC changes on this form. Instead, submit a letter with PIC changes and include all license numbers associated with the change. Facility changes must also be submitted in letter format with all associated license numbers. For facility address changes please contact the NMBOP office for more information.

If there is a name change, a legal document indicating the change must be submitted. **If** a duplicate license is requested after the name change, a \$10.00 fee will be charged. For all replacement/duplicate licenses, a \$10.00 fee will be charged.

This form or other changes can be sent to our office via: FAX (505) 222-9845
E-Mail: Rocio.cruz@state.nm.us or Jessica.Chavez-lanc@state.nm.us
MAIL: NMBOP, 5200 Oakland NE Suite A, Albuquerque, NM 87113

DATE _____ LICENSE # _____ D.O.B. _____

PREVIOUS INFORMATION:

NAME _____ PH# _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PREVIOUS EMPLOYER _____ PH# (_____) _____

PREVIOUS EMPLOYER ADDRESS _____

CITY _____ STATE _____ ZIP _____

CURRENT INFORMATION:

NAME _____ PH# _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL _____

CURRENT EMPLOYER _____ LICENSE #PH0000 _____

EMPLOYER'S ADDRESS _____

CITY _____ STATE _____ ZIP _____

USE BACK OF FORM FOR OTHER INFORMATION YOU WOULD LIKE TO PROVIDE.