

NEVADA STATE BOARD OF PHARMACY
 431 W Plumb Lane ~ Reno, NV 89509
PHARMACEUTICAL TECHNICIAN IN TRAINING APPLICATION
Registration Fee: \$40.00 - (non-refundable money order only, no cash)

Complete Name (no abbreviations):

First: David Middle: Alexander Last: Deat
 Home Address: 3613 Kittiwake Rd. Apt #: _____
 City: N Las Vegas State: NV Zip Code: 89084
 Telephone: _____ Social Security Number: _____
 Date of Birth: _____ Place of Birth: Las Vegas Sex: M or F
 E-mail Address: _____

A licensee is not required to have a Nevada State Business License, however, if you, personally, have one, please provide the number: N/A

I am requesting registration at the following pharmacy:

Pharmacy: SMITHS FOOD & DRUG Store #: 332
 Address: 7130 N DURANGO DRIVE
 City: Las Vegas State: NV Zip Code: 89149
 Signature of Managing Pharmacist: [Signature] Lic #: 16976 Date: 12/29/15

(Without the signature of the managing pharmacist, the application will be returned.)

1. Are you 18 years of age or older? Yes No
 2. Are you a high school graduate or the equivalent? Yes No
 (IF YOU ANSWERED "NO" TO QUESTION 1 AND/OR 2, YOU CAN NOT SUBMIT THIS APPLICATION)

	Yes	No
Been diagnosed or treated for any mental illness, including alcohol or substance abuse, or Physical condition that would impair your ability to perform the essential functions of your license?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Been charged, arrested or convicted of a felony or misdemeanor in <u>any</u> state?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Been the subject of a board citation or an administrative action whether completed or pending in <u>any</u> state?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Had your license subjected to any discipline for violation of pharmacy or drug laws in <u>any</u> state?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you marked YES to any of the numbered questions (3-5) above, include the following information & **provide an explanation & documentation:**

Board Administrative Action:	State	Date:	Case #:	County	Court
	N/A	1/1/14	N/A	N/A	
Criminal Action:	VA	10/15/2013 1/27/2014 6/30/2014	GC13012127 GC1401026 GC13012129	Hibermarle/ Frederick	Hibermarle/Frederick General District court

The Nevada Legislature requires that we include the following questions as part of all applications (NRS639.129)

	Yes	No
Are you the subject of a court order for the support of a child?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
IF you marked YES to the question, above are you in compliance with the court order?.....	<input type="checkbox"/>	<input type="checkbox"/>

I hereby certify that the information furnished on this document is true and correct. I agree to abide by all the statutes, rules and regulations governing pharmaceutical technicians and understand that a violation of any such statutes, rules and regulations may be grounds for suspension or revocation of this permit. I understand that Nevada law requires a licensed PTT who, in their professional or occupational capacity, comes to know or has reasonable cause to believe, a child has been abused/neglected, to report the abuse/neglect to an agency which provides child welfare services or to a local law enforcement agency.

Original Signature, no copies or stamps accepted: David A. Deat Date: 1/7/16

Board Use Only Date Processed: _____ Amount: \$40.00 91565

David A. Dent

Explanation of Attached Documents

Attached are the documents showing the dismissal of two misdemeanors and a Show Cause I was charged with during my first year of college.

First, I was charged with misdemeanor possession of marijuana on 11/19/2013 in Albemarle County, VA (Case Number: GC13012129-00). This resulted in my attendance of a 10-week drug education program called the Alcohol Safety Action Program (ASAP). The class required weekly meetings where I learned about the negative emotional, and physical effects of various abused substances. I also had a one-year probation period where I completed 50 hours of community service and passed periodic drug tests through a separate organization titled Offender Aid and Restoration (OAR).

The second misdemeanor occurred during my one-year probation period while heading back to Charlottesville, VA from a fraternity rush event that took place in Frederick County, VA. I was sitting in the backseat of a vehicle when the sober driver was pulled over. Alcohol was present in the vehicle and I was charged with underage possession of alcohol, on 1/27/2014 (Case Number: GC14001026-00). This resulted in a six-month probation period and completion of the same 10-week drug education program, ASAP, in Frederick. I immediately reported this second charge to my probation officer at OAR in Charlottesville where they allowed the completion of the ASAP class I was already attending in Charlottesville to fulfill both charges. However, there was a miscommunication between OAR and ASAP, which led to ASAP writing to Albemarle district court and, ultimately, the Show Cause for "Non-Compliance Thru ASAP" (Case Number: GC13012129-01). This charge was dismissed on 9/5/2014 as it was proven that I had complied with all ASAP, OAR, and court requirements.

One month later, 10/14/2014, the misdemeanor in Frederick County, VA was dismissed. The month following, on 11/19/2014, the misdemeanor in Albemarle County, VA was dismissed.

I made some very poor decisions my first year of college. I want to assure the Board that I have learned from my mistakes and that they were, and will forever be, isolated instances.

I am eager for an opportunity to continue developing the professional skills necessary to achieve my goal and becoming a Pharmaceutical Technician in Training in Nevada is the first step. I sincerely hope that these dismissed charges will not hinder the Board's ability to approve my application.

Thank you for your time and consideration. I look forward to the Board's response.

David A. Dent

Albemarle General District Court



Traffic/Criminal Case Details

Albemarle General Dis

- Name Search
- Case Number Search
- Hearing Date Search
- Service/Process Search

- Name Search
- Case Number Search
- Hearing Date Search
- Service/Process Search

Case/Defendant Information		
Case Number : GC13012129-00	Filed 10/15/2013 Date :	Locality : COMMONWEALTH OF VA
Name : DENT, DAVID ALEXANDER	Status : Released On Summons	Defense WILSON Attorney :
Address : CHARLOTTESVILLE, VA 22903	AKA1 :	AKA2 :
Gender : Male	Race : White Caucasian(Non-Hispanic)	DOB : 12/19/****

Charge Information		
Charge : POSSESSION OF MARIJUANA		
Code Section : 18.2-250.1	Case Type : Misdemeanor	Class : 1
Offense Date : 10/14/2013	Arrest Date :	Complainant : OLIVER, W
Amended Charge :	Amended Code :	Amended Case Type :

Hearing Information						
Date	Time	Result	Hearing Type	Courtroom	Plea	Continuance Code
10/23/2013	10:00 AM	Continued				
11/19/2013	09:30 AM	Continued				Deferred Disposition
11/19/2014	10:00 AM	Finalized	Review Progress Hearing	138		

Service/Process		
Disposition Information		
Final Dismissed Disposition :		
Sentence Time : 00Months 00Days 00Hours	Sentence Suspended 00Months 00Days 00Hours Time :	
Probation Type :	Probation Time : 00Years 00Months 00Days	Probation Starts :
Operator License Suspension Time : 00Years 06Months 00Days	Restriction Start Date :	Restriction End Date :
Operator License Restriction Codes :		
Fine :	Costs : \$206.00	Fine/Costs Due :
Fine/Costs Paid Paid :	Fine/Costs Paid 11/19/2013 Date :	VASAP :

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Frederick General District Court



Traffic/Criminal Case Details

Frederick General Dist

- Name Search
- Case Number Search
- Hearing Date Search
- Service/Process Search

- Name Search
- Case Number Search
- Hearing Date Search
- Service/Process Search

Case/Defendant Information

Case Number : GC14001026-00	Filed Date : 01/29/2014	Locality : COMMONWEALTH OF VA
Name : DENT, DAVID ALEXANDER	Status : Released On Summons	Defense SOLAK Attorney :
Address : CHARLOTTESVILLE, VA 22902	AKA1 :	AKA2 :
Gender : Male	Race : White Caucasian(Non-Hispanic)	DOB : 12/19/****

Charge Information

Charge : PURCHASE/POSSESS ALCOHOL		
Code Section : 4.1-305	Case Type : Misdemeanor	Class : 1
Offense Date : 01/27/2014	Arrest Date :	Complainant : HOUSTON, T S
Amended Charge :	Amended Code :	Amended Case Type :

Hearing Information

Date	Time	Result	Hearing Type	Courtroom	Plea	Continuance Code
03/03/2014	01:00 PM	Continued	Arraignment			Weather
04/07/2014	01:00 PM	Continued	Arraignment			Deferred Disposition
10/14/2014	01:00 PM	Finalized	Disposition			

Service/Process

Disposition Information

Final Dismissed Disposition :		
Sentence Time : 00Months 00Days 00Hours	Sentence Suspended 00Months 00Days 00Hours Time :	
Probation Type : Unsupervised Probation	Probation Time : 00Years 06Months 00Days	Probation Starts :
Operator License Suspension 00Years 06Months 00Days	Restriction Start 04/07/2014 Date :	Restriction End 10/06/2014 Date :
Operator License Is Restricted To Use To And From ASAP Meetings , License Is Restricted To Use To And From School , License To And From Court Ordered Facility		
Fine :	Costs : \$84.00	Fine/Costs Due :
Fine/Costs Paid Paid :	Fine/Costs Paid 04/07/2014 Date :	VASAP : Yes

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Albemarle General District Court



Traffic/Criminal Case Details

Albemarle General Dis

- Name Search
- Case Number Search
- Hearing Date Search
- Service/Process Search

- Name Search
- Case Number Search
- Hearing Date Search
- Service/Process Search

Case/Defendant Information

Case Number : GC13012129-01	Filed 06/30/2014 Date :	LocaRty : COMMONWEALTH OF VA
Name : DENT, DAVID ALEXANDER	Status : Released On Summons	Defense Attorney : WILSON, LESTER
Address : LAS VEGAS, NV 89130	AKA1 :	AKA2 :
Gender : Male	Race : White Caucasian(Non-Hispanic)	DOB : 12/19/****

Charge Information

Charge : NON-COMPLIANCE THRU ASAP		
Code Section : 19.2-306	Case Type : Show Cause	Class :
Offense Date : 11/19/2013	Arrest Date :	Complainant : ASAP
Amended Charge :	Amended Code :	Amended Case Type :

Hearing Information

Date	Time	Result	Hearing Type	Courtroom	Plea	Continuance Code
07/08/2014	09:00 AM	Continued				
09/05/2014	01:00 PM	Finalized				

Service/Process

Disposition Information

Final Dismissed		
Disposition :		
Sentence Time : 00Months 00Days 00Hours	Sentence Suspended 00Months 00Days 00Hours Time :	
Probation Type :	Probation Time : 00Years 00Months 00Days	Probation Starts :
Operator License Suspension Time : 00Years 00Months 00Days	Restriction Start Date :	Restriction End Date :
Operator License Restriction Codes :		
Fine :	Costs :	Fine/ Costs Due :
Fine/ Costs Paid :	Fine/ Costs Paid Date :	VASAP :

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NEVADA STATE BOARD OF PHARMACY

431 W Plumb Lane ~ Reno, NV 89509

PHARMACEUTICAL TECHNICIAN IN TRAINING APPLICATION

Registration Fee: \$40.00 - (non-refundable money order only, no cash)

Complete Name (no abbreviations):

First: Anna Middle: Elizabeth Last: Ramirez

Home Address: 501 E. Lake Mead Pkwy Apt #: 1313

City: Henderson State: NV Zip Code: 89015

Telephone: Social Security Number:

Date of Birth: Place of Birth: Virroqua, Wisconsin Sex: M or F

E-mail Address:

A licensee is not required to have a Nevada State Business License, however, if you, personally, have one, please provide the number:

I am requesting registration at the following pharmacy:

Pharmacy: CVS Store #: 82

Address: 6432 Losee Rd

City: North Las Vegas State: NV Zip Code: 89086

Signature of Managing Pharmacist: Lic #: 18710 Date: 1/20/16

(Without the signature of the managing pharmacist, the application will be returned.)

- 1. Are you 18 years of age or older? Yes [X] No []
2. Are you a high school graduate or the equivalent? Yes [X] No []
(IF YOU ANSWERED "NO" TO QUESTION 1 AND/OR 2, YOU CAN NOT SUBMIT THIS APPLICATION)

Table with 2 columns: Question, Yes/No. Contains questions 3-5 regarding mental illness, criminal records, and disciplinary actions.

If you marked YES to any of the numbered questions (3-5) above, include the following information & provide an explanation & documentation:

Table for reporting actions: Board Administrative Action, Criminal Action. Includes fields for State, Date, Case #, County, and Court.

The Nevada Legislature requires that we include the following questions as part of all applications (NRS639.129)
Are you the subject of a court order for the support of a child?
IF you marked YES to the question, above are you in compliance with the court order?

I hereby certify that the information furnished on this document is true and correct. I agree to abide by all the statutes, rules and regulations governing pharmaceutical technicians and understand that a violation of any such statutes, rules and regulations may be grounds for suspension or revocation of this permit.

Original Signature, no copies or stamps accepted Date 01/17/2016

Board Use Only Date Processed: Amount: \$40.00 91614

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