



PRECEPTOR ROSTER AND REQUIREMENT RECORD

Please complete the information below for all pharmacy personnel who serve as preceptors in the pharmacy residency program. Regarding the eligibility, responsibilities, and qualification requirements of the Accreditation Standard, indicate (Yes/No) if the preceptor does or does not meet each requirement listed. Cells will move to accommodate information inserted.

Preceptor Name	Learning Experience(s) Precepted Required or Elective?	Area of Day-to-Day Practice	3.6: Preceptor Meets Eligibility Requirements	3.7: Preceptor Meets Responsibility Requirements	3.8: Preceptor Meets Qualifications Requirements

