

Professional Registration System (HCP) User Manual

Version 1.0

REVISION HISTORY

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1. INTRODUCTION

1.1. Overview

The Professional Registration System (PRS) is a common registration system for Healthcare Professionals in Singapore. It supports the Healthcare Professionals (HCP), Human Resources Personnel (HR) and Healthcare Professional Entities (HPE) in the execution of the key business functions of the HPEs, such as professional registration, renewal, disciplinary and continuing professional education.

The PRS is a web-based application that is hosted in the Medinet Hosting Environment.

1.2. Scope

The objective of this document is to provide step-by-step guidelines on the proper usage of the system by Healthcare Professionals to submit applications online to the SPC (Singapore Pharmacy Council).

The targeted users of this document shall be the HCPs.

Users of the online application functionalities should have the basic knowledge of using a internet web browser, such as the Internet Explorer (IE), to navigate from one page to another.

The chapters in this manual are organised in a logically functional manner. They may not necessarily reflect the order, which the users would normally adopt to use the system.

The reader of this manual may study its content in any order. He/She may read the specific sections that illustrate the functions being encountered or study the specific section that he/she is interested in.

1.3. Definitions, Acronyms and Abbreviations

This manual uses the following typographic conventions:

- A “*” character next to a field indicates a mandatory field.
- **[Button Name]** refers to a button.
 - **[Proceed]** button indicates that the system will be displaying the next web page after the current page.
 - **[Confirm]** button indicates that the system will update or insert records in the database and will display the acknowledgment page.
 - **[Print]** button displays the letter on the browser and the system will update the record in the database.

The following format is used by the PRS system:

- DD/MM/YYYY as a Date Format

The manual uses the following abbreviations

- HCP: Healthcare Professional
- HPE: Healthcare Professional Entity
- IE: Internet Explorer
- PC: Practicing Certificate
- PRS: Professional Registration System
- RC: Registration Certificate
- SPC: Singapore Pharmacy Council

2. FUNCTIONS

2.1. Pre-Application

For all new professionals, you will be required to login to the PRS with a Temporary User ID. You may obtain your Temporary User ID from the following URL: <placeholder URL>

Upon access to the URL, the first section of Pre-Application (Question) will be displayed as follows.

Figure 1



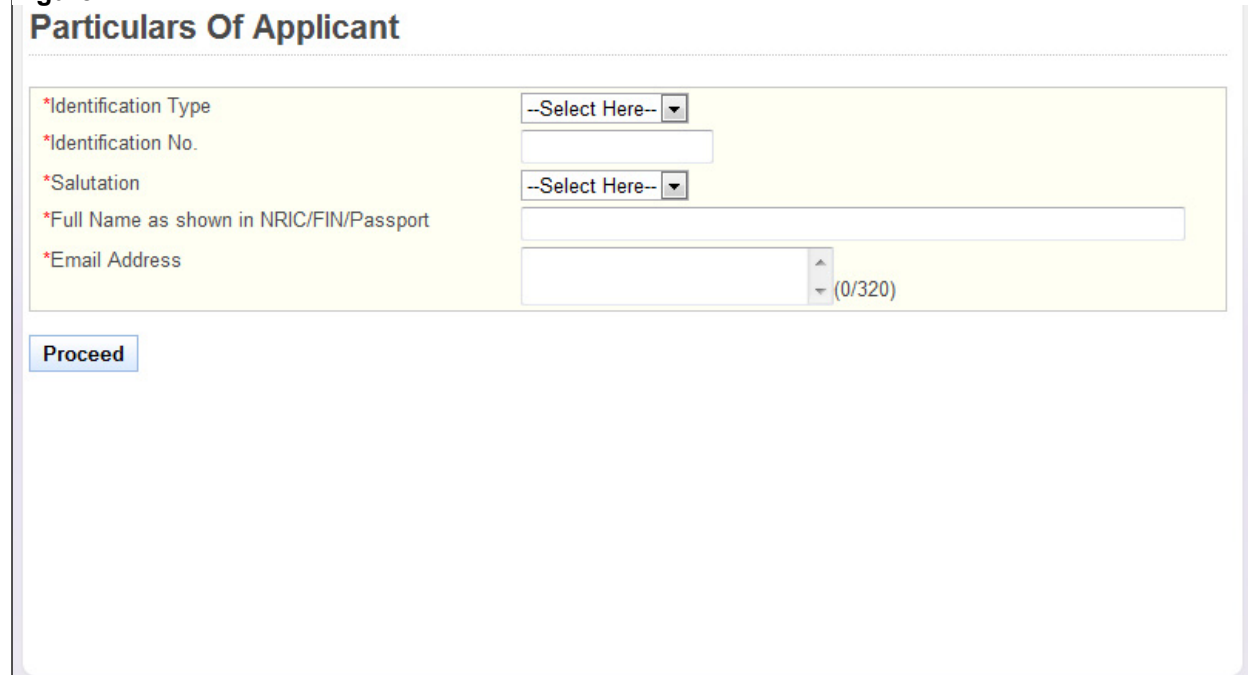
The screenshot shows a web form titled "Pre-application". It contains two questions with radio button options:

- Question 1: "Are you registered with Singapore Pharmacy Council?" with options "Yes" and "No". The "No" option is selected.
- Question 2: "Are you trained in Singapore?" with options "Yes" and "No". The "Yes" option is selected.

At the bottom of the form is a blue button labeled "Proceed".

To proceed, answer the presented questions accordingly. Depending on your answers, there will be three possible outcomes.

Figure 2



The screenshot shows a web form titled "Particulars Of Applicant". It contains several fields for user information:

- *Identification Type: A dropdown menu with "--Select Here--" selected.
- *Identification No.: A text input field.
- *Salutation: A dropdown menu with "--Select Here--" selected.
- *Full Name as shown in NRIC/FIN/Passport: A text input field.
- *Email Address: A text input field with a character count "(0/320)" on the right.

At the bottom of the form is a blue button labeled "Proceed".

Outcome 1: You pass the pre-screening and have never registered before. Click on the [\[Proceed\]](#) button after answering the questions. You will see the following screen.

Figure 3

Pre-application

Please note that your Temporary User ID and Password are as follows:

Temporary User ID : xxxxxxxx
Password : xxxxxxxx

Please print / save this page for your reference. You will be using this Temporary User ID and password for application tracking.

Click on "Proceed" button to continue with the Registration.

To proceed to the Login Page

- Recommended: Print or Save this page for self reference
- Click on the [\[Proceed\]](#) button.

Outcome 2: You pass the pre-screening and have an existing registration. Click on the [\[Proceed\]](#) button after answering the questions. You will see the following screen.

Figure 4

[Instructions for Authorised Users](#)

Healthcare Professionals:
You may login via SingPass or your User ID and password. For first time login users, please click [here](#) to view the documentation required for processing.


HR Personnel:
You may login via your User ID and password. If you do not have an account, please click [here](#) to download the form and mail the signed form to enquiries@spc.gov.sg.

CPE Providers
You may login via your User ID and password. If you do not have an account, please click [here](#) to submit your application for an online account.

User ID ?

Password

[Reset Password](#)

Alternatively, you can login using 

Outcome 3: You do not pass the pre-screening. You will see the following error message.

Figure 5

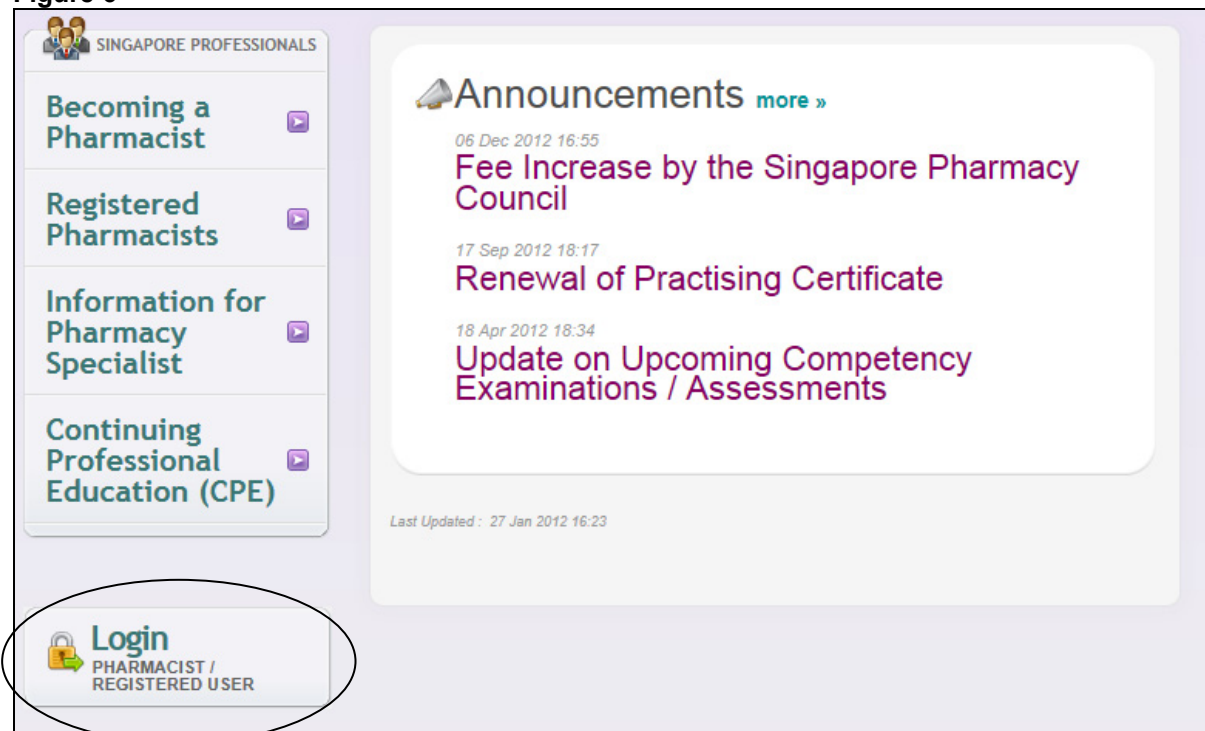
You are not eligible for application to Singapore Pharmacy Council. Please refer to criteria for registration on Singapore Pharmacy Council's website at <http://www.spc.gov.sg>. Thank you for your interest.

Pre-application

2.2. Login to the PRS

To access the PRS, click on the [\[Login\]](#) button on the SPC's website (URL: <http://www.spc.gov.sg>).

Figure 6



The PRS Login screen will be displayed as follows.

Figure 7

[Instructions for Authorised Users](#)

Healthcare Professionals:
You may login via SingPass or your User ID and password. For first time login users, please click [here](#) to view the documentation required for processing.


HR Personnel:
You may login via your User ID and password. If you do not have an account, please click [here](#) to download the form and mail the signed form to enquiries@spc.gov.sg.

CPE Providers
You may login via your User ID and password. If you do not have an account, please click [here](#) to submit your application for an online account.

User ID ?

Password

[Reset Password](#)

Alternatively, you can login using 


To login:

- Enter your **User ID**.
- Enter your **Password**.
- Click on the **[Login]** button.


If your login credentials are correct the landing page will be displayed as follows:


Figure 8


Welcome to PRS

Application 

- » [Enquire Applications](#)
- » [Registration](#)
- » [PC Renewal](#)
- » [Restoration](#)
- » [Additional Qualifications](#)
- » [Issuing of CGS](#)
- » [Reprint of RC / PC](#)

Administration 

Supervisory 

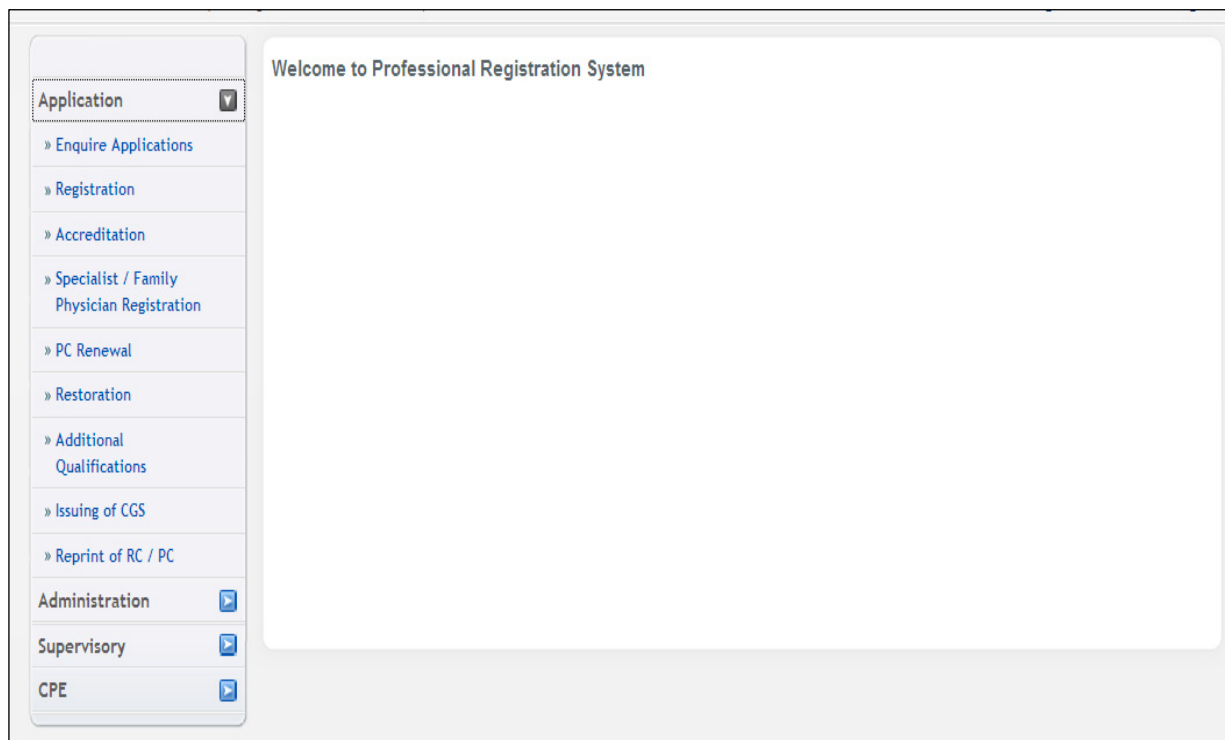
CPE 

2.3. Registration Application

You must first login to the PRS. Please refer to section 1.2 for instructions on how to login to the PRS.

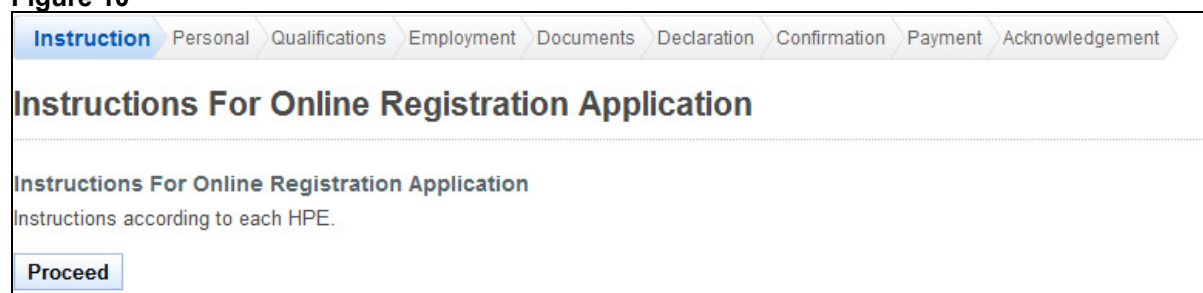
The menu on the left displays the functions you have access to. To submit a Registration Application, click on the [\[Application\]](#) menu item. Click on the [\[Registration\]](#) link.

Figure 9



The Instructions page will be displayed. The following is an extract.

Figure 10



The screenshot shows a web interface with a breadcrumb trail at the top: 'Instruction' (highlighted), 'Personal', 'Qualifications', 'Employment', 'Documents', 'Declaration', 'Confirmation', 'Payment', and 'Acknowledgement'. Below the trail is the title 'Instructions For Online Registration Application'. Underneath, it says 'Instructions according to each HPE.' and there is a 'Proceed' button.

To proceed to the next stage of the application (i.e.: Personal Particulars)

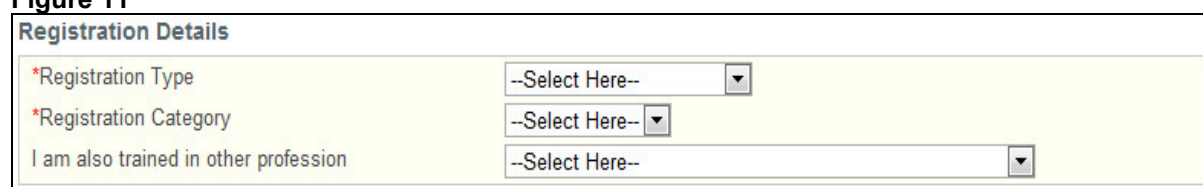
- Click on the [\[Proceed\]](#) button at the bottom of the instructions page

The Personal Particulars page will be displayed. It has the following sections:

- Registration Details
- Particulars of Applicant
- Residential Address in Singapore (As in NRIC)
- Other Address In Singapore
- Foreign Address
- Preferred Mailing Address
- Information on Spouse

If you have logged in with as an existing registered professional, the sections will be pre-loaded with your last known information in the system. The sections will thus be read only. To update your particulars, you will need to use the Update Particulars function. Please refer to [2.6 Update Particulars Application](#).

Figure 11



The screenshot shows a form titled 'Registration Details'. It contains three dropdown menus: '*Registration Type' with a value of '--Select Here--', '*Registration Category' with a value of '--Select Here--', and 'I am also trained in other profession' with a value of '--Select Here--'.


Registration Details

This section allows you to provide information about the type of registration that you are applying for.

- Select your **Registration Type**.
- Select your **Registration Category**.
- (Optional): You may also select another Healthcare profession that you have been trained in.

Figure 12

Particulars Of Applicant

*Identification Type	--Select Here--
*Identification No.	<input type="text"/>
*Salutation	--Select Here--
*Full Name as shown in NRIC/FIN/Passport	<input type="text"/>
*Surname / Family Name	<input type="text"/>
Preferred Order of Name?	<input type="text"/>
Name in Chinese Character	<input type="text"/>
*Gender	<input type="radio"/> Male <input type="radio"/> Female
Race	--Select Here--
*Date of Birth	dd/mm/yyyy 
*Nationality	--Select Here--
*Country/Place of Birth	--Select Here--
*Marital Status	--Select Here--
Religion	--Select Here--
Patient Contact (For Medical Doctors only)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N.A.
Year Obtained Citizenship	yyyy
Other Nationality	--Select Here--
Residential Status (for non-Singapore Citizen)	--Select Here--
Year Permanent Resident Obtained	yyyy
Year Employment Pass Obtained	yyyy
Year Work Permit Obtained	yyyy
*Preferred Email Address	<input type="text"/> (0/320)
Alternate Email Address	<input type="text"/> (0/320)
Home Telephone No.	<input type="text"/>
Office Telephone No.	<input type="text"/>
Mobile No.	<input type="text"/>

Particulars of Applicant

This section allows you to provide information about your personal particulars.

- Select your **Identification Type**.
- Select your **Identification Number**.
- Select your **Salutation**.
- Enter your **Full Name as shown in NRIC/FIN/Passport**.
- Enter your **Surname / Family Name**.
- (Optional): Enter your **Preferred Order of Name**.
- (Optional): Enter your **Name in Chinese Character**.
- Select your **Gender**.
- Select the **Race**.
- Enter your **Date of Birth** (dd/mm/yyyy)
- Select your **Nationality**.
- Select your **Country/Place of Birth**.
- Select your **Marital Status**.
- Optional: Select your **Religion**.
- Select your **Patient Contact** status.(For SMC only)
- Enter in **Year Obtained Citizenship**, the year that you obtained your Singapore citizenship if your original nationality was not Singapore Citizen.

- Enter your **Other Nationality** if you possess one.
- Enter your current **Residential Status** if you are not a Singapore Citizen.
- Enter the **Year Permanent Resident Obtained** if applicable.
- Enter the **Year Employment Pass Obtained** if applicable.
- Enter the **Year Work Permit Obtained** if applicable.
- Enter at least one of the following telephone numbers: **Home Telephone No.**, **Office Telephone No.**, **Mobile No.**

Figure 13

Residential Address In Singapore (As in NRIC)	
Postal Code	<input type="text"/>
Block/House No.	<input type="text"/>
Level - Unit No.	<input type="text"/> - <input type="text"/>
Street Name	-
Building Name	-

Residential Address in Singapore (As in NRIC)

Enter your NRIC address details if you are a Singapore Citizen or Permanent Resident.

- Enter the **Postal Code**. The **Block/House No.**, **Street Name** and **Building Name** will be populated accordingly. You may edit the **Block/House No.** if necessary.
- Enter the **Level** and **Unit No.** if applicable.

Figure 14

Other Address In Singapore	
Postal Code	<input type="text"/>
Block/House No.	<input type="text"/>
Level - Unit No.	<input type="text"/> - <input type="text"/>
Street Name	-
Building Name	-

Other Address in Singapore

Enter your address details in Singapore if you are not a Singapore Citizen or Permanent Resident.

- Enter the **Postal Code**. The **Block/House No.**, **Street Name** and **Building Name** will be populated accordingly. You may edit the **Block/House No.** if necessary.
- Enter the **Level** and **Unit No.** if applicable.

Figure 15

Foreign Address	
Country	<input type="text" value="--Select Here--"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
Contact No.	<input type="text"/>

Foreign Address

Enter your Foreign Address details if you have a Foreign Address that you can be contacted at.

- Select the **Country**.

- Enter the details for **Address Line 1**.
- Optional: Enter the details for **Address Line 2** if applicable.
- Optional: Enter the details for **Address Line 3** if applicable.
- Optional: Enter the details for **Address Line 4** if applicable.
- Enter the **Contact Number** at your Foreign Address.

Figure 16

***Preferred Mailing Address**

<input type="radio"/> Residential Address in Singapore (As in NRIC)	<input type="radio"/> Other Address In Singapore
<input type="radio"/> Foreign Address	<input type="radio"/> Principal Practice Place Address

Preferred Mailing Address

- Indicate your preferred mailing address.

Figure 17

Information On Spouse

Full Name	<input type="text"/>
Nationality	--Select Here--
Occupation	--Select Here--
If Spouse is working in Singapore	
Company Name	<input type="text"/> (0/255)
Company Address	
Postal Code	<input type="text"/>
Block/House No.	<input type="text"/>
Level - Unit No.	<input type="text"/> - <input type="text"/>
Street Name	-
Building Name	-
If Spouse is a registered healthcare professional in Singapore	
Singapore Health Professional Entities	--Select Here--
Registration No. / Identification No.	<input type="text"/>
If your spouse is not a healthcare professional, does he / she intend to apply for registration in Singapore?	
<input type="radio"/> Yes <input type="radio"/> No	

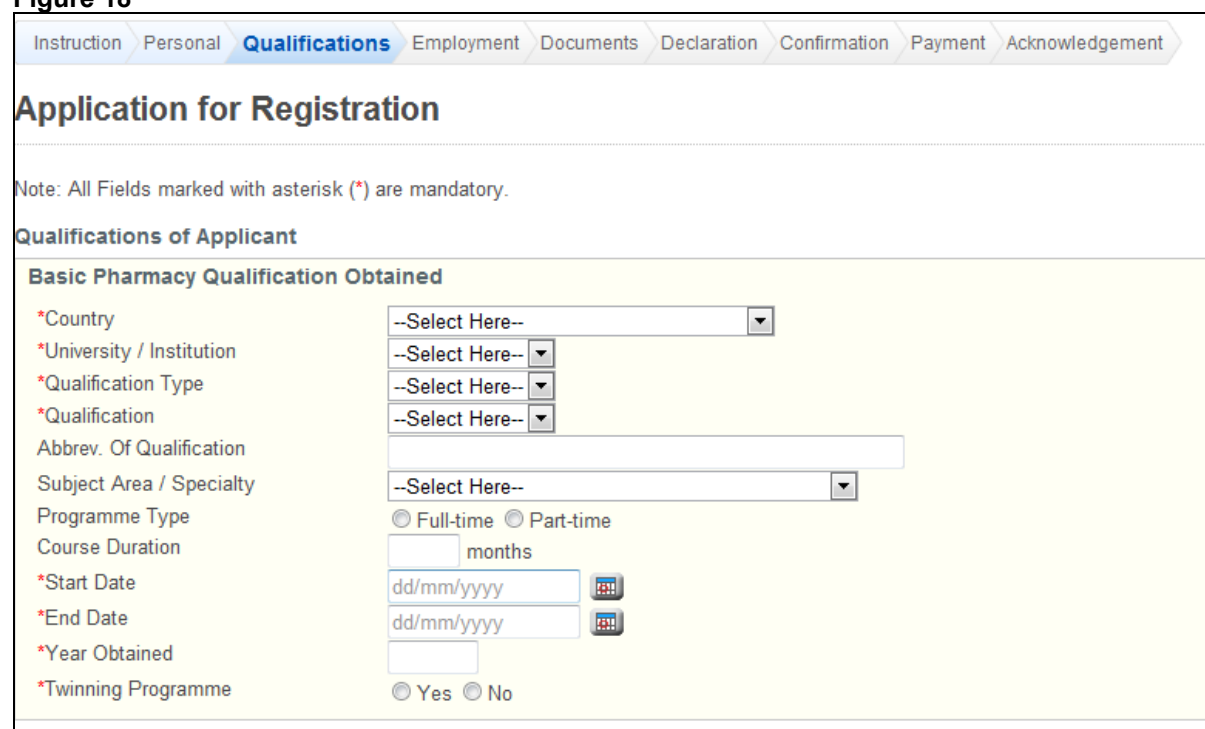
Information on Spouse

This section allows you to enter information about your spouse, if applicable. The fields in this section are not mandatory.

- Click on the **[Save]** button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the **[Proceed]** button to proceed to the next page, Qualifications.

If the inputs pass all the required validation checks, the Qualifications page will be displayed. The following is an extract.

Figure 18



Instruction Personal **Qualifications** Employment Documents Declaration Confirmation Payment Acknowledgement

Application for Registration

Note: All Fields marked with asterisk (*) are mandatory.

Qualifications of Applicant

Basic Pharmacy Qualification Obtained

*Country --Select Here--

*University / Institution --Select Here--

*Qualification Type --Select Here--

*Qualification --Select Here--

Abbrev. Of Qualification

Subject Area / Specialty --Select Here--

Programme Type ☐ Full-time ☐ Part-time

Course Duration months

*Start Date dd/mm/yyyy

*End Date dd/mm/yyyy

*Year Obtained

*Twinning Programme ☐ Yes ☐ No

The Qualifications page has the following sections:

- Basic Medical Qualification Obtained
- Postgraduate / Post-registration Pharmacy Qualifications Obtained
- Clinical / Housemanship / Internship Experience of Applicant
- Work Practice Experience
- Registration / Licensing Details (obtained outside Singapore)

Figure 19

Qualifications of Applicant

Basic Pharmacy Qualification Obtained

*Country

*University / Institution

*Qualification Type


*Qualification


Abbrev. Of Qualification

Subject Area / Specialty

Programme Type ☐ Full-time ☐ Part-time

Course Duration months

*Start Date 

*End Date 

*Year Obtained

*Twinning Programme ☐ Yes ☐ No

Basic Pharmacy Qualification Obtained

- Select the **Country**.
- Select the **University / Institution**.
 - If others, enter the name of the University / Institution in the text box that appears.
- Select the **Qualification Type**.
 - If others, enter the Qualification Type in the text box that appears.
- Select the **Qualification**. The **Abbreviation of the Qualification** will appear accordingly. Edit if necessary.
- Select the **Subject Area / Specialty**.
 - If others, enter the name of the Subject Area / Specialty in the text box.
- Indicate whether the **Programme Type** is full time or part time.
- Enter the **Course Duration** in terms of months.
- Enter the **Start Date**.
- Enter the **End Date**.
- Enter the **Year Obtained**.
- Indicate whether the course is part of a **Twinning Programme**.
 - If Yes, enter the Twinning Partner in the text box that appears. You will be required to enter the information of all the institutions you attended as part of the Twinning Programme. Refer to the following screen.

Figure 20

Please complete the following section only if you DID NOT complete your basic qualification in the SAME University / Institution / Country.

Country	University / Institution	Start Date	End Date	Action
No Basic Qualification added.				
Add More Rows				

- Click on the [\[Add More Rows\]](#) button. A pop-up window appears. Refer to the following screen.

Figure 21

*Country	--Select Here--
*University / Institution	--Select Here--
*Start Date	dd/mm/yyyy
*End Date	dd/mm/yyyy
<input type="button" value="Save"/> <input type="button" value="Cancel"/>	

- Enter the details and click on the **[Save]** button. The pop-up will close and a record will be added to the table. Click on the **[Cancel]** button to close the window without saving any changes.
- Tip: To change the details of an added record, click on the respective hyperlink in the University/Institution column.
- Tip: To delete a record, click on the respective **[Delete]** hyperlink.
- Note: If there is a gap period of more than 30 days between the records, a text area will appear. You will be required to provide details to explain the gap period. Refer to the following screen.

Figure 22

Please specify whereabouts for the following period:	
Period	Details
01/01/2001 to 31/01/2001	

Figure 23

<p>*Are you required to take a licensing examination before you can practice as a Pharmacy professional in the country where you obtained your primary professional qualification? <input type="radio"/> Yes <input type="radio"/> No</p> <p>If "Yes", please provide details</p> <div></div> <p>(0/500)</p> <p>If licensing examination is required, have you attempted and passed the required examination? <input type="radio"/> Yes <input type="radio"/> No</p> <p>If "No", please state reasons</p> <div></div> <p>(0/500)</p>
--

- Indicate whether you are required to take a licensing examination before you can practice as a Pharmacy Professional in the country where you obtained your primary professional qualification.
 - If "Yes", enter the details in the text box.
- If licensing examination is required, indicate whether you have attempted and passed the required examination.
 - If "No", enter the reasons in the text box.

Figure 24

Postgraduate / Post-registration Pharmacy Qualifications Obtained								
Country	University / Institution	Qualification Type	Qualification	Abbrev. Of Qualification	Programme Type	Specialty	Year Conferred	Action
No Postgraduate / Post-registration Qualification added.								
<input type="button" value="Add Postgraduate Qualification"/>								

Postgraduate / Post-registration Pharmacy Qualifications Obtained

- Click on the [\[Add Postgraduate Qualification\]](#) button. A pop-up window will appear. Refer to the following screen.

Figure 25

- Enter information about your qualification in the provided fields and click on the [\[Save\]](#) button. If the inputs pass the required validation checks, the pop-up window will close and a record will be added to the table. Click on [\[Cancel\]](#) to close the window without saving any changes.
- Tip: To change the details of an added record, click on the respective hyperlink in the University/Institution column.
- Tip: To delete a record, click on the respective [\[Delete\]](#) hyperlink.

Figure 26

Clinical / Housemanship / Internship Experience of Applicant

This section allows you to enter your Clinical, Housemanship or Internship Experience, if any.

- Click on the [\[Add Clinical Experience\]](#) button. A pop-up window appears. Refer to the following screen.

Figure 27

Clinical Experience

*Country

--Select Here--

*University / Institution

--Select Here--

Department

--Select Here--

Discipline

--Select Here--

*Start Date

dd/mm/yyyy

*End Date

dd/mm/yyyy

Total Clinical Practice Hours

Save

Cancel

- Select the **Country**.
- Select the **University / Institution**.
 - If others, enter the University/ Institution in the text box that appears.
- Optional: Enter the **Department**.
- Optional: Select the **Discipline**.
 - If others, enter the Discipline in the text box that appears.
- Enter the **Start Date**.
- Enter the **End Date**.
- Optional: Enter the total **Clinical Practice Hours**.
- Click on the [\[Save\]](#) Button to close the pop-up. A new record will be added to the table. Click on the [\[Cancel\]](#) button to close the pop-up without saving any changes.
- Tip: To change the details of an added record, click on the respective hyperlink in the University/Institution column.

Figure 28

Work Practice Experience									
Date Joined	Date Left	Employers Name	Country	Institution / Organisation	Department	Grade / Designation / Appointment	Type	No of Hours per Week	Action
No Work Practice Experience added.									
Add Practice Experience									

Work Practice Experience

This section allows you to provide details about your Work Practice Experience.

- Click on the [\[Add Practice Experience\]](#) button. A pop-up window appears. Refer to the following screen. All fields must be filled in for the record to be saved successfully.

Figure 29

Work Practice Experience

*Date Joined	dd/mm/yyyy	
*Date Left	dd/mm/yyyy	
*Employers Name	--Select Here--	
*Country	--Select Here--	
*Institution / Organisation	--Select Here--	
Department	--Select Here--	
*Grade / Designation / Appointment	--Select Here--	
*Type	<input type="radio"/> Full-time <input type="radio"/> Part-time	

- Enter the **Date Joined**.
- Enter the **Date Left**.
- Select the **Employer's Name**.
- Select the **Country**.
- Select the **Institution / Organisation**.
 - If others, enter the Institution/Organisation in the textbox that appears.
- Enter the **Department**.
- Select the **Grade/Designation/Appointment**.
 - If others, enter the Grade/Designation/Appointment in the textbox that appears.
- Select whether you were working **Full-time** or **Part-time**.
 - If is part time, enter the number of hours per week.
- Click on the **[Save]** button to save your changes and close the pop-up. A new record will be added to the table. Click on the **[Cancel]** button to close the pop-up without saving.
- Note: If there is a gap period of more than 30 days between the records, a text area will appear. You will be required to provide details to explain the gap period. Refer to the following screen.

Figure 30

Please specify whereabouts for the following period:

Period	Details
01/01/2001 to 31/01/2001	<div></div>

Figure 31

Registration / Licensing Details (obtained outside Singapore)

Country of Registration	Name of Council / Registration Authority	Registration Type/Category	Registration / Licensing No.	Date of Registration	Current PC No.	Current PC Start Date	Current PC End Date	Action
-------------------------	--	----------------------------	------------------------------	----------------------	----------------	-----------------------	---------------------	--------

No Registration / Licensing Details added.

Registration / Licensing Details (Obtained outside Singapore)
This section allows you to enter details about any Registration or Licenses that you have obtained outside of Singapore.

- Click on the [\[Add Licensing Details\]](#) button. A pop-up window appears. Refer to the following screen. At least one of the fields must be filled in.

Figure 32

Registration / Licensing Details (obtained outside Singapore)

Country of Registration	--Select Here--	
Name of Council / Registration Authority		(0/255)
Registration Type/Category		
Registration / Licensing No.		
Date of Registration	dd/mm/yyyy	
Current PC No.		
Current PC Start Date	dd/mm/yyyy	
Current PC End Date	dd/mm/yyyy	

[Save](#) [Cancel](#)

- Enter the **Country of Registration**.
- Enter the **Name of Council / Registration Authority**.
- Enter the **Registration type/Category**.
- Enter the **Registration/ Licensing No.**
- Enter the **Date of Registration**.
- Enter the **Current PC No.**
- Enter the **Current PC Start Date**.
- Enter the **Current PC End Date**.
- Click on the [\[Save\]](#) Button to save your changes. The pop-up window will close and a new record will be added. Click on the [\[Cancel\]](#) button to close the pop-up without saving.
- Tip: You may click on the [\[Personal\]](#) link at the top of the page to return to the previous page to make changes, if necessary.
- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button to proceed to the next page, Employment.

If all inputs pass the validation checks, the Employment page will be displayed. The following is an extract.

Figure 33

The Employment page has the following sections:

- Current (Singapore) Employment Details
- Proposed (Singapore) Employment Details
- Principal Place of Practice
- Secondary Place of Practice

If you have logged in as an existing registered professional, the sections will be pre-loaded and read-only. To make changes, you must go to Update Particulars. Refer to [2.6 Update Particulars Application](#) for more information.


Figure 34

Current (Singapore) Employment Details

This section allows you to enter your current employment details in Singapore.

- Select the **Activity Status**.
 - If Not Working, select the reason in the dropdown list that appears.
 - If reason for not working is others, enter the reason in the text box that appears.
- If currently employed, select the **Appointment**.
 - If others, enter the appointment in the text box that appears.
- If currently employed, select the **Name of Institution/Organisation**.
- If currently employed, select the **Nature of Work**.
 - If others, enter the Nature of Work in the text box that appears.
- If currently employed, select the **Department / Division**.
- If currently employed, enter the **Date Joined**.
- If currently employed, enter the **Date Left** if you will be leaving your current employment at a known future date.

Figure 35



Proposed (Singapore) Employment Details

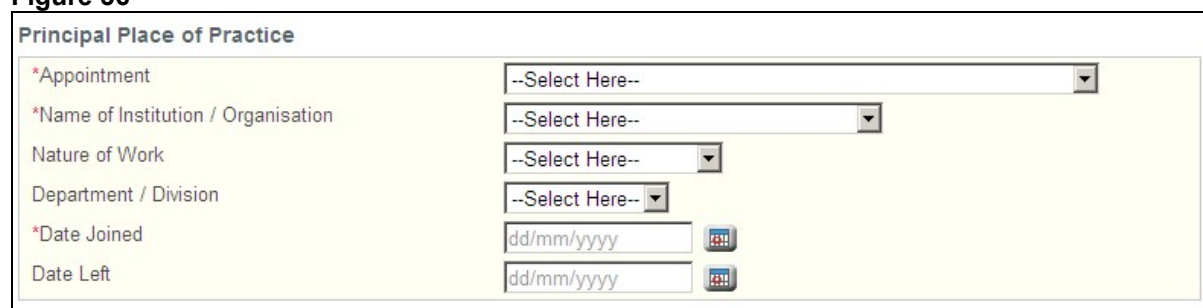
Activity Status	--Select Here--
Appointment	--Select Here--
Name of Institution / Organisation	--Select Here--
Nature of Work	--Select Here--
Department / Division	--Select Here--
Date Joined	dd/mm/yyyy
Date Left	dd/mm/yyyy

Proposed (Singapore) Employment Details

This section allows you to enter information about your proposed employment details. This section is mandatory if you are currently unemployed.

- Select the **Activity Status**.
- Select the **Appointment**.
 - If others, enter the appointment in the text box that appears.
- Select the **Name of Institution/Organisation**.
- Select the **Nature of Work**.
 - If others, enter the Nature of Work in the text box that appears.
- Select the **Department / Division**.
- Enter the **Date Joined**.
- Enter the **Date Left** if you will be leaving your proposed employment at a known future date.

Figure 36



Principal Place of Practice

*Appointment	--Select Here--
*Name of Institution / Organisation	--Select Here--
Nature of Work	--Select Here--
Department / Division	--Select Here--
*Date Joined	dd/mm/yyyy
Date Left	dd/mm/yyyy

Principal Place of Practice

This section allows you to enter information about your Principal Place of Practice.

- Select the **Appointment**.
 - If others, enter the appointment in the text box that appears.
- Select the **Name of Institution/Organisation**.
- Optional: Select the **Nature of Work**.
 - If others, enter the Nature of Work in the text box that appears.
- Select the **Department / Division**.
- Enter the **Date Joined**.
- Optional: Enter the **Date Left** if you will be leaving your Principal Place of Practice at a known future date.
- For new applicants for provisional registration, the details for Principal Place of practice would be the same as that entered for Proposed Employment Details.

Figure 37

Secondary Place of Practice						
Name of Institution / Organisation	Appointment	Nature of Work	Department / Division	Date Joined	Date Left	Action
No Secondary Place of Practice added.						
<input type="button" value="Add Secondary Place of Practice"/>						
<input type="button" value="Save"/> <input type="button" value="Proceed"/>						

Secondary Place of Practice

This section allows you to add information about your Secondary Places of Practice, if any.

- Click on the [\[Add Secondary Place of Practice\]](#) button. A pop-up window appears. Refer to the following screen.

Figure 38

Application for Registration	
Secondary Place of Practice	
*Appointment	--Select Here--
*Name of Institution / Organisation	--Select Here--
Nature of Work	--Select Here--
Department / Division	--Select Here--
*Date Joined	dd/mm/yyyy
Date Left	dd/mm/yyyy
<input type="button" value="Save"/> <input type="button" value="Cancel"/>	

- Select the **Appointment**.
 - If others, enter the appointment in the text box that appears.
- Select the **Name of Institution/Organisation**.
- Optional: Select the **Nature of Work**.
 - If others, enter the Nature of Work in the text box that appears.
- Select the **Department / Division**.
- Enter the **Date Joined**.
- Optional: Enter the **Date Left** if you will be leaving your Secondary Place of Practice at a known future date.
- Click on the [\[Save\]](#) button to save your changes and close the pop-up. A new record will be added to the table. Click on the [\[Cancel\]](#) button to close the pop-up without saving the changes.
- Tip: To change the details of an added record, click on the respective hyperlink in the Name of Institution / Organisation column.
- Tip: To delete a record, click on the respective [\[Delete\]](#) hyperlink.
- Tip: You may click on the [\[Personal\]](#) or [\[Qualifications\]](#) links to return to the previous respective pages to make changes, if necessary.
- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button to proceed to the next page, Documents.

If the inputs pass all the validation checks, the Documents page will be displayed as follows. All mandatory documents must be uploaded before you will be able to proceed to the next stage. Do note the following restrictions when uploading:

- File must be in JPEG(.jpg or .jpeg) or PDF (.pdf) format.
- Each file size must not exceed 1MB.
- For Photographs, the dimensions must be 400 by 514 pixels.

Figure 39

Application for Registration

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf).
- Each file size must not exceed 1MB
- For Photograph, the dimensions must be 400 by 514 pixels

Mandatory Documents

Document Title	Evaluation Summary of Pre-application Training		
*Upload Document	<input type="text"/>	Browse..	Attach
Document Title	NRIC or Passport & Employment Pass		
*Upload Document	<input type="text"/>	Browse..	Attach
Document Title	Project Abstract		
*Upload Document	<input type="text"/>	Browse..	Attach
Document Title	Survey		
*Upload Document	<input type="text"/>	Browse..	Attach

Additional Documents

Document Title	--Select Here--		
File	<input type="text"/>	Browse..	Attach

Documents Attached		
Evaluation Summary of Pre-application Training	Replace	Delete
NRIC or Passport & Employment Pass	Replace	Delete

[Proceed](#)

To upload a document

- Click on the [\[Browse\]](#) button. A file dialog box will appear to let you select your file.
- Select the file to upload and click on the [\[Open\]](#) button. The file dialog box closes.
- Click on the [\[Attach\]](#) button. The selected file will be uploaded.
- Tip: Click on the [\[Delete\]](#) link if you do not wish to include the uploaded document with your application.
- Tip: Click on the [\[Replace\]](#) link if you wish to replace the uploaded document with another. A popup-window will appear. Refer to the following screen.

Figure 40

Replace Document	
<p>Note:</p> <ul style="list-style-type: none"> • File must be in JPEG(.jpg or .jpeg), PDF (.pdf). • Each file size must not exceed 1MB 	
Document Title	NRIC or Passport & Employment Pass
File	<input type="text"/> <input type="button" value="Browse.."/>
<input type="button" value="Attach"/> <input type="button" value="Cancel"/>	

- Click on the [\[Proceed\]](#) button. If all mandatory documents have been uploaded, the Declarations page will be displayed. The following is an extract.

Figure 41

Instruction	Personal	Qualifications	Employment	Documents	Declaration	Confirmation	Payment	Acknowledgement
<h2>Application for Registration</h2> <p>Note: All fields are mandatory.</p> <p>Declarations by Applicant</p> <p>Please answer all questions. If you have answered "yes" to any of the questions, please provide full details in a separate document and upload supporting documents where applicable.</p> <ol style="list-style-type: none"> 1 Have you ever suffered or are you suffering from any physical or mental illness which may impair your fitness to practise as a pharmacist? If your answer is yes, please provide more information. <input type="radio"/> Yes <input type="radio"/> No 2 Have you ever consulted a psychiatrist or are you currently undergoing treatment for psychiatric ailment? If your answer is yes, please provide more information. <input type="radio"/> Yes <input type="radio"/> No 3 Have you ever been the subject of an inquiry or proceedings by a professional body, licensing body, health authority or any law enforcement body in Singapore or elsewhere? If your answer is yes, please provide more information. <input type="radio"/> Yes <input type="radio"/> No 4 Have you, at any time before the submission of this application, ever been convicted in a court of law in Singapore or elsewhere of any offence? If your answer is yes, please provide more information. <input type="radio"/> Yes <input type="radio"/> No 5 Has your registration application or renewal as a pharmacist outside Singapore (if applicable) been rejected, refused or otherwise requiring an appeal process? If your answer is yes, please provide more information. <input type="radio"/> Yes <input type="radio"/> No <p> <input type="checkbox"/> I declare that the particulars stated in this application and the documents attached are true and authentic, and the information contained herein remains unchanged to date. To the best of my knowledge and belief, I have not withheld any material fact. </p> <p> <input type="checkbox"/> I acknowledge that the Singapore Pharmacy Council reserves all rights to withhold and/or to terminate my registration and/or take any action it deems fit, if any of the above information or documents tendered is found subsequently to be false. I am also aware that it is a criminal offence to make any false statements, to provide any false information and/or document(s) to the Singapore Pharmacy Council. I also understand and give my consent for the Singapore Pharmacy Council to make any enquiries or obtain any information & documents that it deems appropriate to establish my fitness to practise. </p> <p> <input type="checkbox"/> I also authorise Singapore Pharmacy Council to release the data provided by me, to the Ministry of Health and such other parties where the Registrar deems essential for the purpose of their official duties under current legislations. </p> <p> <input type="button" value="Save"/> <input type="button" value="Proceed"/> </p>								

- Indicate your answer for all the questions. If you answer "Yes" to any of the questions, you will be required to provide further details in the text box that appears.
- Tick the checkboxes to make your declarations.
- Tip: You may click on the [\[Personal\]](#), [\[Qualifications\]](#), [\[Employment\]](#), [\[Documents\]](#) or [\[Declarations\]](#) links to return to the respective previous page to make changes, if necessary.

- Click on the **[Save]** button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the **[Proceed]** button to proceed to the next page, Confirmation.

If the inputs all pass the required validation checks, the confirmation page will be displayed. The Confirmation Page will display all the details that you have entered. The following is an extract.

Figure 42

Instruction Personal Qualifications Employment Documents Declaration Confirmation Payment Acknowledgement	
Application for Registration	
Registration Details	
Registration Type	Full Registration
Registration Category	New Application
I am also trained in other profession	-
Particulars Of Applicant	
Identification Type	NRIC
Identification No.	S8501273H
Salutation	Mr
Full Name as shown in NRIC/FIN/Passport	Desmond Teo
Surname / Family Name	Teo
Preferred Order of Name	Desmond Teo
Name in Chinese Character	-
Gender	Male
Race	Chinese
Date of Birth	01/06/1985
Nationality	SINGAPORE CITIZEN
Country/Place of Birth	Singapore
Marital Status	Single
Religion	Free Thinker
Patient Contact (For Medical Doctors only)	-
Year Obtained Citizenship	-
Other Nationality	-
Residential Status (for non-Singapore Citizen)	-
Year Permanent Resident Obtained	-
Year Employment Pass Obtained	-
Year Work Permit Obtained	-
Preferred Email Address	edmundloh@ncs.com.sg
Alternate Email Address	-
Home Telephone No.	+65 45691230
Office Telephone No.	-
Mobile No.	-

To proceed to the Payment page:

- Tip: You may click on the links at the top to return to the previous pages to make changes, if necessary.
- Click on the **[Confirm]** button.

The Payment page will be displayed as follows.

Figure 43

The screenshot shows a navigation bar with steps: Instruction, Personal, Qualifications, Employment, Documents, Declaration, Confirmation, **Payment**, and Acknowledgement. The main heading is 'Application for Registration'. Below it, a note states: 'Please note that the following fee(s) is/are non-refundable.' A table follows with the following data:

Fee Type	Unit Price (SGD)	Quantity	Amount Due (SGD)
Application Fee of Full Registration - New Application	XX.XX	X	XX.XX

To proceed to the next stage of the application

- Click on the **[Proceed]** button. The BillCollect payment interface will be displayed. Follow the on screen instructions to make your payment.

Once payment has been completed, the Acknowledgement page will be displayed.

Figure 44

The screenshot shows a navigation bar with steps: Instruction, Personal, Qualifications, Employment, Documents, Declaration, Confirmation, **Acknowledgement**, and Payment. The main heading is 'Application for Registration'. Below it, the text reads: 'Please be informed that your application for registration has been submitted to Singapore Pharmacy Council on 05/03/2013. Please print / save a copy of this acknowledgement for your reference.' This is followed by: 'Your application no. is SPC-20130305-5033-FR.' Then: 'You may check the status of your application online using the same User ID and password. For any query, please email to enquiries@spc.gov.sg and quote the above application no. and name.' Below this is a link: '[Rate this service](#)'. At the bottom left is a button labeled 'Print'.

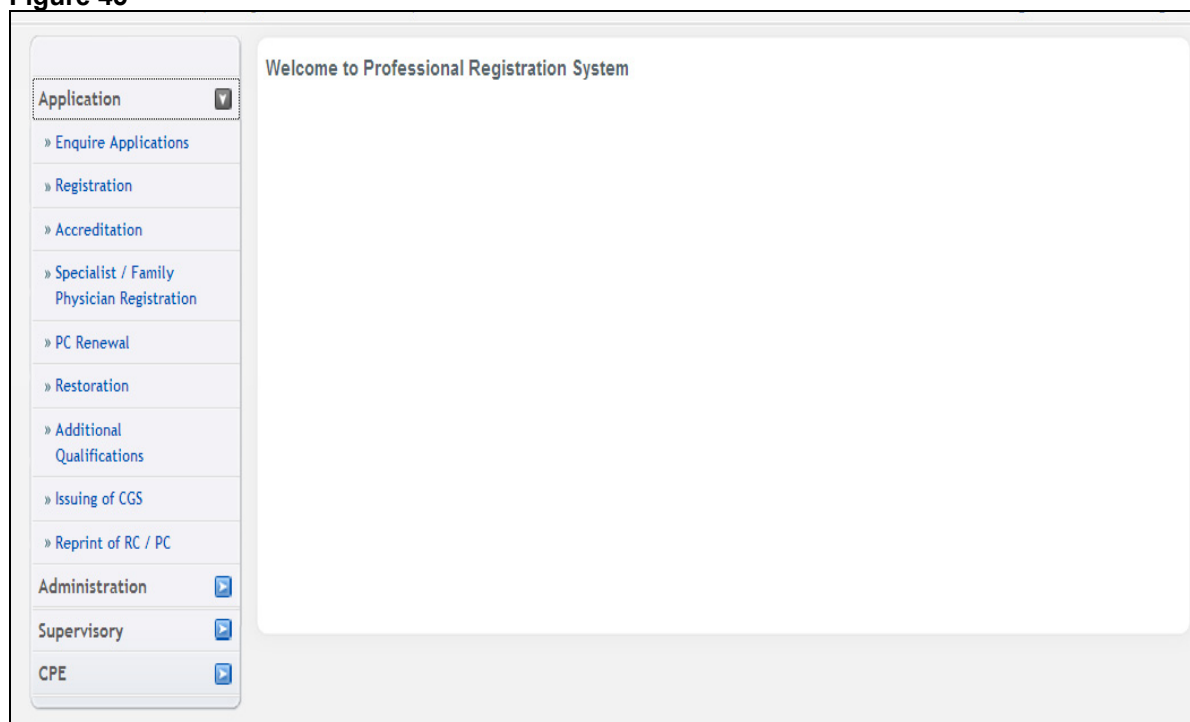
- Optional:
 - Click on the **[email]** link to email SPC for any queries, if any.
 - Click on **[Rate this service]** hyperlink to rate the service
- Recommended: Click on the **[Print]** button to print out a copy of the acknowledgement page.

2.4. PC Renewal Application

To submit a PC Renewal Application, you must first login to PRS. Refer to [2.2 Login to the PRS](#) for more information.

After logging in, click on the [\[PC Renewal\]](#) link.

Figure 45



If you are eligible for PC Renewal, the first page of the PC Renewal and Off-Register application process will be displayed. Please review the Personal Particulars section and the Employment Details section. If they are outdated, please update them using the Update Particulars function. Refer to [2.6 Update Particulars Application](#) for more information. The following is an extract of the first page.

Figure 46

PC Renewal - Update Particulars
Form
Declarations
Confirmation
Payment
Acknowledgement

Renewal

Click [here](#) for important Instructions for applying renewal online.

PC Renewal Details

Current PC	Full-fee (2 years)		
Renewal Criteria	Requirement	Achievement	Status
CPE/Patient Care points	x pts	y pts	Met Requirement

Personal Particulars

Identification Type	NRIC
Identification No.	S1234567A
Full Name as shown in NRIC/FIN/Passport	Linda Tan
Salutation	Dr
Surname / Family Name	Tan
Preferred Order of Name	Linda Tan
Name in Chinese Character	NIL
Nationality	Singapore Citizen
Marital Status	Single
Religion	Buddhist
Year Obtained Citizenship (yyyy)	N.A.
Other Nationality	NIL
Residential Status (for non-Singapore Citizen)	N.A.
Year PR Obtained	N.A.
Year EP Obtained	N.A.
Year WP Obtained	N.A.
Preferred Email Address	linda@yahoo.com.sg
Alternate Email Address	NIL
Home Telephone No.	+65 12345678
Office Telephone No.	NIL
Mobile No.	+65 23456789
Residential Address in Singapore (As in NRIC)	Blk 123 ABC Road Singapore 123456.
Other Singapore Residential Address	NIL
Foreign Address	NIL
Preferred Mailing Address	Residential Address in Singapore (As in NRIC)
Patient Contact (For Medical Doctors only)	Yes

The first page will have the following sections:

- PC Renewal Details: This section will display whether you satisfy the renewal requirements.
- Personal Particulars: This section will display your last known personal particulars as stored in PRS.
- Employment Details: This section will display your last known Employment Details as stored in PRS.

To proceed to the Application Form page:

- Recommended: Click on the [\[here\]](#) link to download and read the instructions for submitting a PC Renewal and Off-Register application.
- Indicate that the information is correct.

- Click on the [\[Proceed\]](#) button.

If the inputs all pass the required validation checks, the Application Form page will be displayed as follows.

Figure 47

PC Renewal - Update Particulars
Form
Declarations
Confirmation
Payment
Acknowledgement

PC Renewal

PC Renewal Details

*PC Type
☒ Full-fee (2 years)

S/N	Practising Certificate	Expiry Date	Payment Due Date	*Renew?
1	Pharmacist	31/03/2013	28/02/2013	<input type="checkbox"/>

*Send PC by
☐ Normal Mail
☐ Registered Mail
☐ Self-Collection

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf).
- Each file size must not exceed 1MB

Mandatory Documents

Document Title	Recent Color Photograph against White Background	
*File	<input type="text"/>	<input type="button" value="Browse.."/> <input type="button" value="Attach"/>

Additional Documents

Document Title	--Select Here--
File	<input type="text"/> <input type="button" value="Browse.."/> <input type="button" value="Attach"/>

Documents Attached

No document attached.

To proceed to the Declarations page:

- Select the **PC Type**.
- Indicate your preferred collection method.
- Upload all mandatory documents.
- Upload any additional documents that you will require to support your application.
- Tip: You may click on the links on top to return to the previous pages to make changes, if necessary.
- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button.

If the inputs all pass the required validation checks, the declaration page will be displayed as follows.

Figure 48

[PC Renewal - Update Particulars](#) [Form](#) **Declarations** [Confirmation](#) [Payment](#) [Acknowledgement](#)

Renewal

Note: All fields are mandatory

Declarations By Applicant

Please answer all questions. If you have answered "Yes" to any of the questions, please provide full details and upload supporting documents where applicable.

1. Have you ever suffered or are you suffering from any physical or mental illness which may impair your fitness to practise as a pharmacist? If your answer is yes, please provide more information

☐ Yes ☐ No

2. Have you ever consulted a psychiatrist or are you currently undergoing treatment for psychiatric ailment? If your answer is yes, please provide more information.

☐ Yes ☐ No

3. Have you ever been the subject of an inquiry or proceedings by a professional body, licensing, health authority or the police in Singapore or elsewhere? If your answer is yes, please provide more information.

☐ Yes ☐ No

4. Has your registration application or renewal as a pharmacist outside Singapore (if applicable) been rejected, refused or otherwise requiring an appeal process? If your answer is yes, please provide more information. If your answer is yes, please provide more information.

☐ Yes ☐ No

5. Has your registration application or renewal as a pharmacist outside Singapore (if applicable) been rejected, refused or otherwise requiring an appeal process? If your answer is yes, please provide more information.

☐ Yes ☐ No

☐ I declare that the particulars stated in this application and the documents attached are true and authentic, and the information contained herein remains unchanged to date. To the best of my knowledge and belief, I have not withheld any material fact.

☐ I acknowledge that the Singapore Pharmacy Council reserves all rights to withhold and/or to terminate my registration and/or take any action it deems fit, if any of the above information or documents tendered is found subsequently to be false. I am also aware that it is a criminal offence to make any false statements, to provide any false information and/or document(s) to the Singapore Pharmacy Council. I also understand and give my consent for the Singapore Pharmacy Council to make any enquiries or obtain any information & documents that it deems appropriate to establish my fitness to practise.

To proceed to the Confirmation page:

- Indicate your answer for all the questions and make your declarations.
- Tip: You may click on the links on top to return to the previous pages to make changes, if necessary.
- Click on the **[Save]** button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the **[Proceed]** button.

If the inputs pass the required validation checks, the Confirmation page will be displayed. The details that you have submitted for your PC Renewal application will be displayed.

Figure 49

PC Renewal Details			
*PC Type		Full-fee (2 years)	
*Send PC by		Normal Mail	
S/N	Practising Certificate	Current Expiry Date	Payment Due Date
1	Pharmacist	31/03/2013	28/02/2013
Documents Attached			
Recent Color Photograph against White Background			
Document Title 1			
Declarations by Applicant			
1	Have you ever suffered or are you suffering from any physical or mental illness which may impair your fitness to practise as a pharmacist? If your answer is yes, please provide more information. No -		
2	Have you ever consulted a psychiatrist or are you currently undergoing treatment for psychiatric ailment? If your answer is yes, please provide more information. No -		
3	Have you ever been the subject of an inquiry or proceedings by a professional body, licensing, health authority or the police in Singapore or elsewhere? If your answer is yes, please provide more information. No -		
4	Have you, at any time before the submission of this application, ever been convicted in a court of law in Singapore or elsewhere of any offence? If your answer is yes, please provide more information. No		
5	Has your registration application or renewal as a pharmacist outside Singapore (if applicable) been rejected, refused or otherwise requiring an appeal process? If your answer is yes, please provide more information. No -		
<input checked="" type="checkbox"/> I declare that the particulars stated in this application and the documents attached are true and authentic, and the information contained herein remains unchanged to date. To the best of my knowledge and belief, I have not withheld any material fact.			
<input checked="" type="checkbox"/> I acknowledge that the Singapore Pharmacy Council reserves all rights to withhold and/or to terminate my registration and/or take any action it deems fit, if any of the above information or documents tendered is found subsequently to be false. I am also aware that it is a criminal offence to make any false statements, to provide any false information and/or document(s) to the Singapore Pharmacy Council. I also understand and give my consent for the Singapore Pharmacy Council to make any enquiries or obtain any information & documents that it deems appropriate to establish my fitness to practise.			
<input type="button" value="Confirm"/>			

To proceed to the Payment page:

- Tip: You may click on the links on top to return to the previous pages to make changes, if necessary.
- Click on the **[Confirm]** button.

If the inputs all pass the required validation checks, the payment page will be displayed.

Figure 50

The screenshot shows a web interface for PC Renewal. At the top, a horizontal navigation bar contains the following steps: PC Renewal - Update Particulars, Form, Declarations, Confirmation, **Payment** (highlighted in blue), and Acknowledgement. Below the navigation bar, the heading "PC Renewal" is displayed. A note states: "Please note that the following fee(s) is/are non-refundable." Below this note is a table with the following data:

Fee Type	Unit Price (SGD)	Quantity	Amount Due (SGD)
Application Fee of Full-fee (2 years)	XX.XX	X	XX.XX

To proceed to the Acknowledgement page:

- Click on the **[Proceed]** button.

If your employer is not paying on your behalf, the BillCollect payment interface will be displayed. Follow the on screen instructions to make payment. Once payment is completed, the acknowledgement page will be displayed.

Figure 51

The screenshot shows the Acknowledgement page of the PC Renewal process. The navigation bar at the top includes: PC Renewal - Update Particulars, Form, Declarations, Confirmation, Payment, and **Acknowledgement** (highlighted in blue). The heading "PC Renewal" is present. The main content area contains the following text:

Please be informed that your renewal request has been submitted to Singapore Pharmacy Council on 01/01/2001. Please print / save a copy of this acknowledgement for your reference.

Your application no. is SPC-20010101-1234-PCR.

You may check the status of your application online using the same User ID and password. For any query, please email to enquiries@spc.gov.sg and quote the above application no.

At the bottom left, there is a **Print** button.

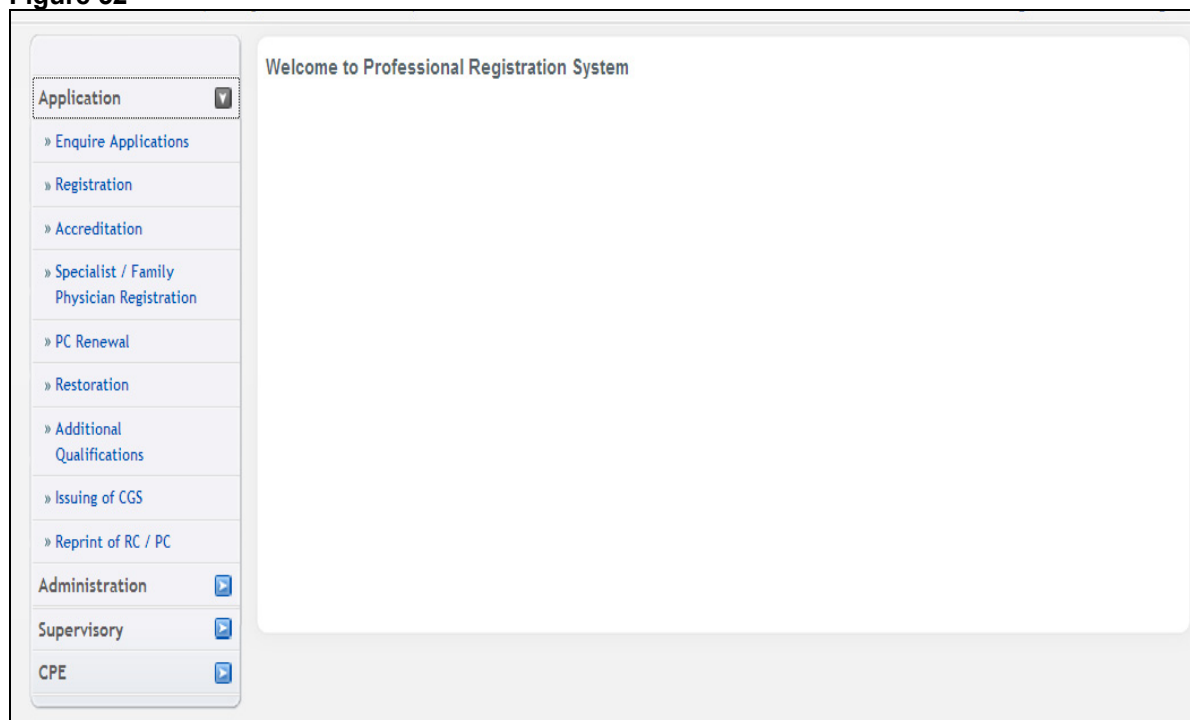
- (Optional):
 - Click on the **[email]** link to email the SPC for any queries, if any.
 - Click on the **[Rate this Service]** hyperlink to rate the service.
- Recommended: Click on **[Print]** button to print out a copy of the acknowledgement page.

2.5. Restoration Application

If you are currently Off Register and were previously on Full Registration, you may apply to have your registration restored. You will first need to login to PRS. Refer to [2.2 Login to the PRS](#) for more details.

After logging in, click on the [\[Restoration\]](#) link.

Figure 52



The Restoration application form will be displayed. The following is an extract.

Figure 53

Restoration – Form
Upload Documents
Declarations
Confirmation
Payment
Acknowledgement

Restoration of Registration

Click [here](#) for important Instructions for applying restoration online.
Note: All fields marked with asterik (*) are mandatory

Restoration Details

*Please select the registers you wish to restore

<input type="checkbox"/>	Register	Status
<input type="checkbox"/>	Pharmacist	Off Register (Removed – voluntary non-renewal of PC)

*Reason for restoration

Personal Particulars

Identification Type	NRIC
Identification No.	S1234567A
Full Name as shown in NRIC/FIN/Passport	Linda Tan
Salutation	Dr
Surname / Family Name	Tan
Preferred Order of Name	Linda Tan
Name in Chinese Character	NIL
Nationality	Singapore Citizen
Marital Status	Single
Religion	Buddhist
Year Obtained Citizenship (yyyy)	N.A.
Other Nationality	NIL
Residential Status (for non-Singapore Citizen)	N.A.
Year PR Obtained	N.A.
Year EP Obtained	N.A.
Year WP Obtained	N.A.
Preferred Email Address	linda@yahoo.com.sg
Alternate Email Address	NIL
Home Telephone No.	+65 12345678
Office Telephone No.	NIL
Mobile No.	+65 23456789
Residential Address in Singapore (As in NRIC)	Blk 123 ABC Road Singapore 123456.
Other Singapore Residential Address	NIL
Foreign Address	NIL
Preferred Mailing Address	Residential Address in Singapore (As in NRIC)

The Restoration application form has the following sections:

- Restoration Details: Displays your restoration options.
- Personal Particulars: Displays your last known personal particulars information stored in PRS.
- Employment Details: Displays your last known employment details stored in PRS.

The Personal Particulars and Employment Details section are read only. You may update the information from the Update Particulars module. Please refer to [2.6 Update Particulars Application](#) for more information.

To proceed to the Documents page:

- Recommended: Click on the [\[here\]](#) link to download and read the instructions for submitting a Restoration application.
- Tick the register you wish to have restored.
- Enter **Reason for Restoration**.

- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button.

If the inputs all pass the required validation checks, the Documents page will be displayed as follows.

Figure 54

Restoration – Form Documents Declarations Confirmation Payment Acknowledgement

Restoration of Registration

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf)
- Each file size must not exceed 1MB

Mandatory Documents

Document Title <Mandatory document title>

*File Browse Attach

Additional Documents

Document Title --Select Here--

File Browse Attach

Attached Documents

NRIC or Passport & Employment Pass	Replace	Delete
Testimonial	Replace	Delete

Proceed

To proceed to the Declarations page:

- Upload all documents necessary for supporting your Restoration application.
- Tip: You may click on the [\[Restoration - Form\]](#) link to return to the previous respective page to make changes, if necessary.
- Click on the [\[Proceed\]](#) button.

If the inputs all pass the required validation checks, the Declarations page will be displayed.

Figure 55

[Restoration - Form](#) [Upload Documents](#) **[Declarations](#)** [Confirmation](#) [Payment](#) [Acknowledgement](#)

Declaration of Restoration

Note: All fields are mandatory.

Declarations by Applicant

Please answer all questions. If you have answered "Yes" to any of the questions, please provide full details in a separate document and upload supporting documents where applicable.

- 1 Have you ever suffered or are you suffering from any physical or mental illness which may impair your fitness to practise as a pharmacist, as certified by a registered medical practitioner? If your answer is yes, please provide more information.
☐ Yes ☐ No
- 2 Have you ever consulted a psychiatrist or are you currently undergoing treatment for psychiatric ailment? If your answer is yes, please provide more information.
☐ Yes ☐ No
- 3 Have you ever been the subject of an inquiry or proceedings by a professional body, licensing body, health authority or any law enforcement agency in Singapore or elsewhere? If your answer is yes, please provide more information.
☐ Yes ☐ No
- 4 Have you, at any time before the submission of this application, ever been convicted in a court of law in Singapore or elsewhere of any offence? If your answer is yes, please provide more information.
☐ Yes ☐ No
- 5 Has your registration application or renewal as a pharmacist outside Singapore (if applicable) been rejected, refused or otherwise requiring an appeal process? If your answer is yes, please provide more information.
☐ Yes ☐ No

☐ I declare that the particulars stated in this application and the documents attached are true and authentic, and the information contained herein remains unchanged to date. To the best of my knowledge and belief, I have not withheld any material fact.

☐ I acknowledge that the SPC reserves all rights to withhold and/or to terminate my registration and/or take any action it deems fit, if any of the above information or documents tendered is found subsequently to be false. I am also aware that it is a criminal offence to make any false statements, to provide any false information and/or document(s) to the SPC. I also understand and give my consent for the SPC to make any enquiries or obtain any information & documents that it deems appropriate to establish my fitness to practise.

☐ I also authorise SPC to release the data provided by me, to the Ministry of Health and such other parties where the Registrar deems essential for the purpose of their official duties under current legislations.

To proceed to the Confirmation page:

- Indicate your answers for the questions. If you answer "Yes" to any of the questions, you will be required to provide further details in the text boxes that appear.
- Make your declarations.
- Tip: You may click on the [\[Restoration - Form\]](#) or [\[Documents\]](#) links to return to the previous respective pages to make changes, if necessary.
- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button.

If the inputs pass the required validation checks, the Confirmation page will be displayed. The following is an extract.

Figure 56

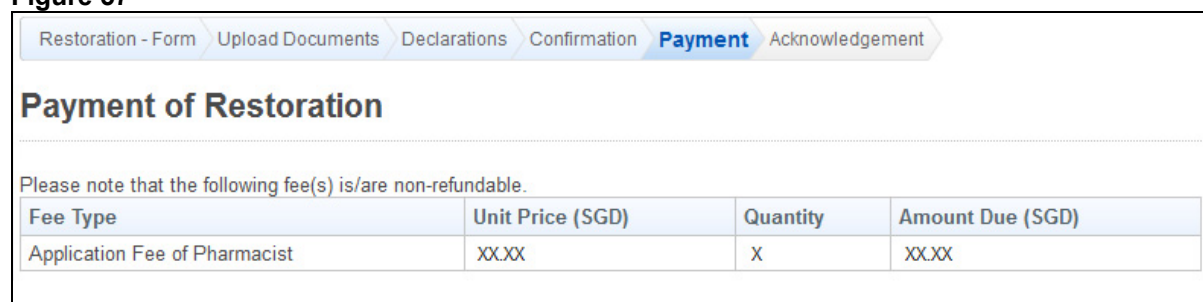
Restoration – Form	Upload Documents	Declarations	Confirmation	Payment	Acknowledgement
<h2>Restoration of Registration</h2>					
Restoration Details					
Register		Status			
Pharmacist		Off Register (Removed – voluntary non-renewal of PC)			
Reason for restoration		Return from medical leave			
Particulars of Applicant					
Identification Type		NRIC			
Identification No.		S7001333Z			
Full Name as shown in NRIC/FIN/Passport		Lee Hong Hui			
Salutation		Mr			
Surname / Family Name		Lee			
Preferred Order of Name		Lee Hong Hui			
Name in Chinese Character		NIL			
Nationality		Singaporean			
Marital Status		Married			
Religion		Buddhist			
Year Obtained Citizenship (yyyy)		N.A.			
Other Nationality		NIL			
Residential Status (for non-Singapore Citizen)		N.A.			
Year PR Obtained (yyyy)		N.A.			
Year EP Obtained (yyyy)		N.A.			
Year WP Obtained (yyyy)		N.A.			
Preferred Email Address		lee70@yahoo.com			
Alternate Email Address		NIL			
Home Telephone No.		+65 12345678			
Office Telephone No.		+65 12345678			
Mobile No.		+65 23456789			
Residential Address in Singapore (As in NRIC)		Blk 123 ABC Road Singapore 123456.			
Other Singapore Residential Address		NIL			
Foreign Address		NIL			
Preferred Mailing Address		Residential Address in Singapore (As in NRIC)			

To proceed to the Payment page:

- Tip: You may click on the [\[Restoration - Form\]](#), [\[Documents\]](#) or [\[Declarations\]](#) links to return to the previous respective pages to make changes, if necessary.
- Click on the [\[Confirm\]](#) button.

The payment page will be displayed.

Figure 57



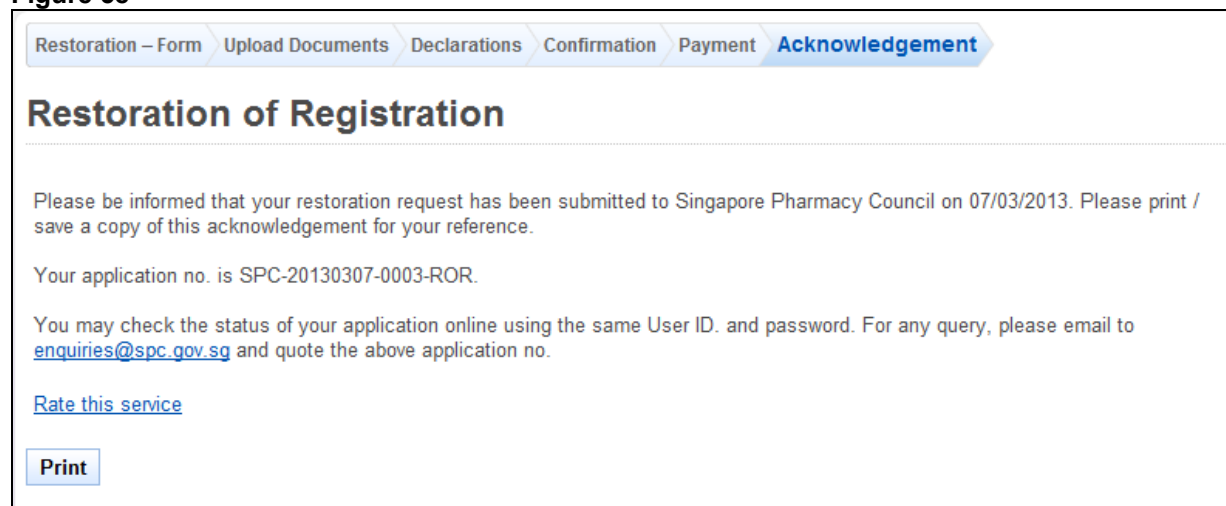
Fee Type	Unit Price (SGD)	Quantity	Amount Due (SGD)
Application Fee of Pharmacist	XX.XX	X	XX.XX

To proceed to the Acknowledgement page:

- Click on the **[Proceed]** button. The BillCollect payment interface will be displayed. Follow the on screen instructions to make payment.

After payment has been successfully made, the Acknowledgement page will be displayed.

Figure 58



Please be informed that your restoration request has been submitted to Singapore Pharmacy Council on 07/03/2013. Please print / save a copy of this acknowledgement for your reference.

Your application no. is SPC-20130307-0003-ROR.

You may check the status of your application online using the same User ID. and password. For any query, please email to enquiries@spc.gov.sg and quote the above application no.

[Rate this service](#)

Print

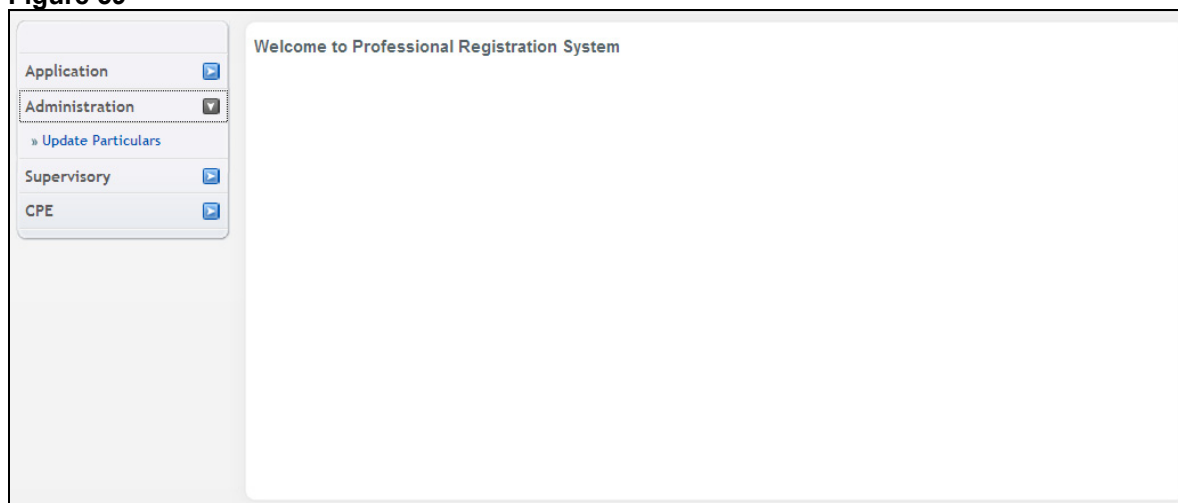
- Optional:
 - Click on the **[email]** link to email SPC for any queries you may have regarding the application.
 - Click on **[Rate this Service]** hyperlink to rate the service.
- Recommended: Click on the **[Print]** button to print out a copy of the acknowledgement page.

2.6. Update Particulars Application

For any changes in your particulars, you can update them through the Update Particulars function. You must first login to the PRS. Refer to [2.2 Login to the PRS](#) for more information.

After logging in, click on the [\[Update Particulars\]](#) link.

Figure 59



The Update Particulars - Selection page will be displayed (Figure 59).

Note that professionals on full registration will also have the option to edit their employment details (Figure 60).

Figure 60

The screenshot shows the 'Update Particulars - Selection' page. At the top, there is a breadcrumb trail: 'Update Particulars - Selection' (highlighted in blue), 'Form', 'Confirmation', and 'Acknowledgement'. Below the breadcrumb, there is a text line: 'Click [here](#) for important instructions for updating particulars online.' Below this, there is a section titled 'I wish to update the following particulars:'. This section contains two radio button options. The first option is selected (indicated by a filled circle) and reads: 'Marital Status, Religion, Patient Contact and Contact details (contact numbers, addresses and preferred mailing address)'. The second option is 'Identification Type/No., Name, Nationality and Residential Status details.' At the bottom of the form, there is a blue 'Proceed' button.

Figure 61

The screenshot shows the 'Update Particulars - Selection' page, similar to Figure 60. The breadcrumb trail is the same: 'Update Particulars - Selection' (highlighted in blue), 'Form', 'Confirmation', and 'Acknowledgement'. Below the breadcrumb, there is a text line: 'Click [here](#) for important instructions for updating particulars online.' Below this, there is a section titled 'I wish to update the following particulars:'. This section contains two radio button options. The first option is selected (indicated by a filled circle) and reads: 'Marital Status, Religion, Patient Contact and Contact details (contact numbers, addresses and preferred mailing address)'. The second option is 'Identification Type/No., Name, Nationality, Residential Status and Employment details.' At the bottom of the form, there is a blue 'Proceed' button.

To proceed to the Application Form page:

- Recommended: Click on the [\[here\]](#) link to download and read the instructions for submitting an Update Particulars application.
- Indicate which set of the personal particulars you wish to update.

- Click on the [\[Proceed\]](#) button.

If the option “Marital Status, Religion and Contact Details” was selected, the following application form will be displayed. The input fields will be pre-loaded accordingly.

Figure 62

[Update Particulars - Selection](#) **Form** [Confirmation](#) [Acknowledgement](#)

Particulars of Applicant

Marital Status

Single

Religion

Free Thinker

Patient Contact (For Medical Doctors only)

☒ Yes ☐ No ☐ N.A.

Preferred Email Address

edmundloh@ncs.com.sg

(20/320)

Alternate Email Address

(0/320)

Home Telephone No.

12345678

Office Telephone No.

Mobile No.

Other Address In Singapore

Postal Code

Block/House No.

Level - Unit No.

 -

Street Name

-

Building Name

-

Foreign Address

Country

--Select Here--

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Contact No.

Preferred Mailing Address

☒ Residential Address in Singapore (As in NRIC)

☐ Other Address In Singapore

☐ Foreign Address

☐ Principal Practice Place Address

Save

Proceed

To proceed to the Confirmation page:

- Make changes to the input fields, where required.
- Tip: You may click on the [\[Update Particulars - Selection\]](#) or [\[Personal\]](#) links at the top of the page to return to the respective pages to make changes, if necessary.

- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button.

If the inputs all pass the required validation checks, the Confirmation page will be displayed.

Figure 63

Update Particulars - Selection	Form	Confirmation	Acknowledgement
--------------------------------	------	--------------	-----------------

Particulars of Applicant

Marital Status	Single
Religion	Free Thinker
Patient Contact (For Medical Doctors only)	Yes
Preferred Email Address	edmundloh@ncs.com.sg
Alternate Email Address	-
Home Telephone No.	12345678
Office Telephone No.	-
Mobile No.	-

Other Address In Singapore

Postal Code	-
Block/ House No.	-
Level - Unit No.	-
Street Name	-
Building Name	-

Foreign Address

Country	-
Address Line 1	-
Address Line 2	-
Address Line 3	-
Address Line 4	-
Contact No.	-

Preferred Mailing Address

Preferred Mailing Address	Residential Address in Singapore (As in NRIC)
---------------------------	---

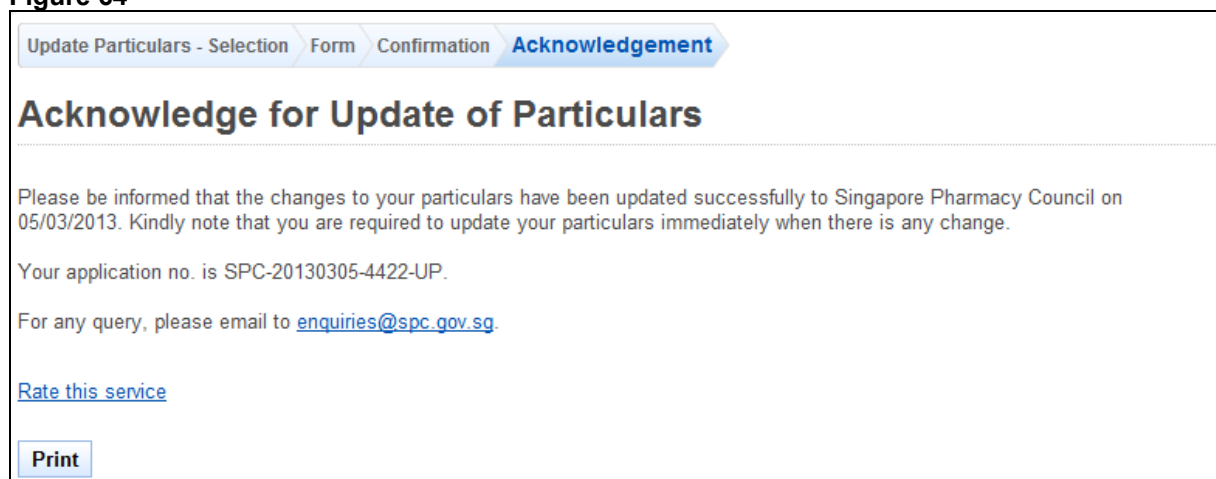
[Confirm](#)

To proceed to the Acknowledgement page:

- Tip: You may click on the [\[Update Particulars - Selection\]](#) or [\[Personal\]](#) links at the top of the page to return to the respective pages to make changes, if necessary.
- Click on the [\[Confirm\]](#) button

The Acknowledgement page will be displayed. Your particulars have been updated.

Figure 64



Update Particulars - Selection > Form > Confirmation > **Acknowledgement**

Acknowledge for Update of Particulars

Please be informed that the changes to your particulars have been updated successfully to Singapore Pharmacy Council on 05/03/2013. Kindly note that you are required to update your particulars immediately when there is any change.

Your application no. is SPC-20130305-4422-UP.

For any query, please email to enquiries@spc.gov.sg.

[Rate this service](#)

Print

- (Optional): Click the [\[email\]](#) link to email SPC for any queries
- (Optional) : Click the [\[Rate this service\]](#) hyperlink to rate the service
- Recommended: Click the [\[Print\]](#) button to print out a copy of the acknowledgement page.

If the option “Identification Type/No., Name, Nationality, and Residential Status.” was selected instead, the following application form will be displayed (Figure 64). The input fields will be pre-loaded with your last known information.

Note professionals on full registration will have the option to also edit their employment details in the application form (Figure 65).

Figure 65

Update Particulars - Selection

Form

Confirmation

Acknowledgement

Update Personal Particulars

Note that each update has to be accompanied with relevant supporting documents.

*Identification Type	NRIC
*Identification No.	S8501273H
*Full Name as shown in NRIC/FIN/Passport	Frank Ho
*Salutation	Dr
Surname / Family Name	Ho
Preferred Order of Name?	Frank Ho
Name in Chinese Character	
*Nationality	SINGAPORE CITIZEN
Year Obtained Citizenship	yyyy
Other Nationality	--Select Here--
Residential Status (for non-Singapore Citizen)	--Select Here--
Year Permanent Resident Obtained	yyyy
Year Employment Pass Obtained	yyyy
Year Work Permit Obtained	yyyy

Additional Documents

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf).
- Each file size must not exceed 1MB

Document Title	--Select Here--		
File		Browse..	Attach

Documents Attached

No document attached.

SaveProceed

Figure 66

Update Particulars - Selection
Form
Confirmation
Acknowledgement

Update Personal Particulars

Note that each update has to be accompanied with relevant supporting documents.

*Identification Type	NRIC
*Identification No.	S8501273H
*Full Name as shown in NRIC/FIN/Passport	Joe Chang
*Salutation	Dr
Surname / Family Name	Chang
Preferred Order of Name?	Joe Chang
Name in Chinese Character	
*Nationality	SINGAPORE CITIZEN
Year Obtained Citizenship	yyyy
Other Nationality	--Select Here--
Residential Status (for non-Singapore Citizen)	--Select Here--
Year Permanent Resident Obtained	yyyy
Year Employment Pass Obtained	yyyy
Year Work Permit Obtained	yyyy

Current Employment Details

*Activity Status	Working Full-time in Singapore
*Appointment	General Practitioner
*Appointment Effective Date	01/01/2012
*Name of Institution/ Organisation	National Neuroscience Institute
Nature of Work	Clinical
Department/ Division	Depart 1
*Date Joined	01/01/2012
Date Left	dd/mm/yyyy

Proposed Employment Details

*Activity Status	--Select Here--
Appointment	--Select Here--
Appointment Effective Date	dd/mm/yyyy
Name of Institution/ Organisation	--Select Here--
Nature of Work	--Select Here--
Department/ Division	--Select Here--
Date Joined	dd/mm/yyyy
Date Left	dd/mm/yyyy

Principal Practice Place

*Appointment	General Practitioner
*Name of Institution / Organisation	National Neuroscience Institute
Nature of Work	Clinical
Department / Division	Depart 1
*Date Joined	01/01/2012
Date Left	dd/mm/yyyy

Secondary Place of Practice

Name of Institution / Organisation	Appointment	Nature of Work	Department / Division	Date Joined	Date Left	Action
No Secondary Place of Practice added.						

[Add Secondary Place of Practice](#)

Additional Documents

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf).
- Each file size must not exceed 1MB

Document Title	--Select Here--
File	<input type="text"/> <input type="button" value="Browse.."/> <input type="button" value="Attach"/>

Documents Attached

No document attached.

To proceed to the Confirmation page:

- Make changes to the input fields, where necessary.
- Upload supporting documents, where necessary.

- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button.

If the inputs pass the required validation checks, the Confirmation page will be displayed. The following is an extract.

Figure 67

The screenshot shows a web interface with a breadcrumb trail: 'Update Particulars - Selection' > 'Form' > 'Confirmation' > 'Acknowledgement'. The 'Confirmation' step is highlighted. Below the breadcrumb is the title 'Update Personal Particulars'. A table displays the following details:

Identification Type	NRIC
Identification No.	S8501273H
Full Name as shown in NRIC/FIN/Passport	Joe Chang
Salutation	Dr
Surname / Family Name	Chang
Preferred Order of Name	Joe Chang
Name in Chinese Character	-
Nationality	SINGAPORE CITIZEN
Year Obtained Citizenship	-
Other Nationality	-
Residential Status (for non-Singapore Citizen)	-
Year Permanent Resident Obtained	-
Year Employment Pass Obtained	-
Year Work Permit Obtained	-

To proceed to the Acknowledgement page:

- Click on the [\[Attached Document\]](#) link to check through the details of the respective Attached Document
- Click on the [\[Confirm\]](#) button

The Acknowledgement page will be displayed. An application will be sent to SPC for processing. Once it is approved, your particulars will be updated accordingly.

Figure 68

The screenshot shows a web interface with a breadcrumb trail: 'Update Particulars - Selection' > 'Form' > 'Confirmation' > 'Acknowledgement'. The 'Acknowledgement' step is highlighted. Below the breadcrumb is the title 'Acknowledge for Update of Particulars'. The main content area contains the following text:

Please be informed that the changes to your particulars have been updated successfully to Singapore Pharmacy Council on 05/03/2013. Kindly note that you are required to update your particulars immediately when there is any change.

Your application no. is SPC-20130305-4423-UP.

For any query, please email to enquiries@spc.gov.sg.

[Rate this service](#)

[Print](#)

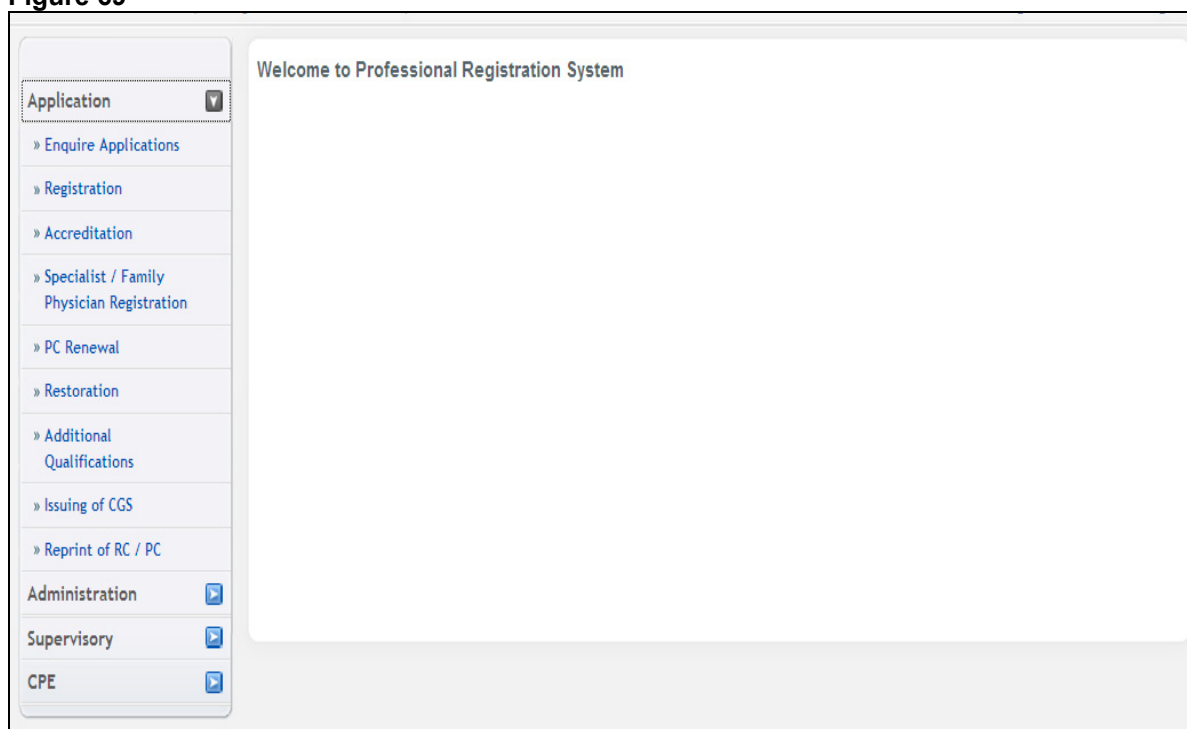
- Optional: Click on the [\[email\]](#) link to email SPC for queries
- Optional : Click the [\[Rate this Service\]](#) hyperlink to rate the service
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the Acknowledgement page.

2.7. Additional Qualifications Application

You can submit post-registration qualifications through the Additional Qualifications function. You will first need to login to PRS. Refer to [2.2 Login to the PRS](#) for more information.

After logging in, access the Additional Qualifications function by clicking on the [\[Additional Qualifications\]](#) link.

Figure 69



The Additional Qualifications application form will be displayed.

Figure 70

here for important instructions for submitting an Additional Qualifications/ Titles application.' There is a table with one header row 'Added Qualification/ Title' and one data row 'No matching records found.' At the bottom is a button labeled 'Add Qualification/ Title'."/>The screenshot shows the 'Additional Qualification / Title Form'. At the top, there is a breadcrumb trail: 'Additional Qualification / Title Form > Confirmation > Payment > Acknowledgement'. Below this is the title 'Additional Qualifications / Titles'. Under the title, there is a text link: 'Click [here](#) for important instructions for submitting an Additional Qualifications/ Titles application.' Below this is a table. The table has one header row with the text 'Added Qualification/ Title'. The table body contains one row with the text 'No matching records found.' At the bottom of the form is a button labeled 'Add Qualification/ Title'.

To add an additional qualification / title:

- Recommended: Click on the [\[here\]](#) link to download and read the instructions for submitting an Additional Qualification/Titles application.
- Click on the [\[Add Qualifications / Title\]](#) button to add new qualifications or title. A pop-up window will appear. Refer to the following screen.

Figure 71

Additional Qualification/ Title Details

*Awarding Country

--Select Here--

*Awarding University/ Institution

--Select Here--

*Qualification/ Title Type

--Select Here--

*Qualification/ Title

--Select Here--

Abbrev. Of Qualification/ Title

Specialty/ Subspecialty

--Select Here--

Field of Interest

--Select Here--

Programme Type

☐ Full-time
 ☐ Part-time

Course Duration

months

*Year Obtained

Mandatory Documents

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf).
- Each file size must not exceed 1MB

Document Title

Photocopy of the Certificate

*File

Additional Documents

Document Title

--Select Here--

File

Attached Documents

No document attached.

- Enter information about the qualification that you wish to add. Ensure all mandatory fields are filled in.
- Upload the necessary supporting documents.
- Click on the [\[Save\]](#) button. If your inputs satisfy the validation checks, the pop-up will close and a new record will be added to the table. Click on the [\[Cancel\]](#) button to close the pop-up without saving your changes.

The main page will look like the following when records have been successfully added to the Added Qualification/ Title table.

Figure 72

Additional Qualification / Title – form Confirmation Payment Acknowledgement

Additional Qualification

Click [here](#) for important instructions for submitting an Additional Qualifications/ Titles application.

Added Qualification/ Title	
Specialty in Critical Care Pharmacy	Delete
Specialty in Nutrition Support Pharmacy	Delete
Specialty in Ambulatory Care Pharmacy	Delete
Specialty in Pharmacotherapy	Delete
Specialty in Nuclear Pharmacy	Delete
Specialty in Oncology Pharmacy	Delete

Add Qualification / Title

Proceed

- Tip: Click on the **[Added Qualification / Title]** link to make changes to the respective Qualification / Title.
- Tip: Click on the **[Delete]** link if you wish to remove Qualification / Title from your application.
- Click on the **[Proceed]** button.

If the inputs all pass the required validation checks, the Confirmation page will be displayed.

Figure 73

Additional Qualification / Title – form **Confirmation** Payment Acknowledgement

Additional Qualification

Added Additional Qualification / Titles

Qualification / Title
Specialty in Critical Care Pharmacy
Specialty in Nutrition Support Pharmacy
Specialty in Ambulatory Care Pharmacy
Specialty in Pharmacotherapy
Specialty in Nuclear Pharmacy
Specialty in Oncology Pharmacy

Confirm

To proceed to the Payment page:

- Recommended: Click on the **[Qualification / Title]** link to check through the details of the respective qualification / title you have choose to submit.
- Tip: You may click on the **[Additional Qualification / Title - Form]** link at the top of the page to return to the previous page to make changes, if necessary.
- Click on the **[Confirm]** button.

The Payment page will be displayed.

Figure 74

Additional Qualification / Title – form Confirmation **Payment** Acknowledgement

Additional Qualification

Please note that the following fee(s) is/are non-refundable

Fee Type	Unit Price (SGD)	Quantity	Amount Due (SGD)
Application for Additional Qualification	XX.XX	6	YY.YY

[Proceed](#)

To proceed to the Acknowledgement page:

- Click on [\[Proceed\]](#) button

The BillCollect payment interface will be displayed. Follow the on screen instructions to make payment. After payment is completed, the Acknowledgement page will be displayed.

Figure 75

enquiries@spc.gov.sg and quote the above application no.' Below this, there is a link 'Rate this service' and a 'Print' button."/>

Additional Qualification / Title – form Confirmation Payment **Acknowledgement**

Additional Qualification

Please be informed that your application request has been submitted to Singapore Pharmacy Council on 05/03/2013. Please print / save a copy of this acknowledgement for your reference.

Your application(s) are:

Name of Qualification	Application No
Q3	SPC-20130305-4425-AQ

You may check the status of your application online using the same Registration No. and password. For any query, please email to enquiries@spc.gov.sg and quote the above application no.

[Rate this service](#)

[Print](#)

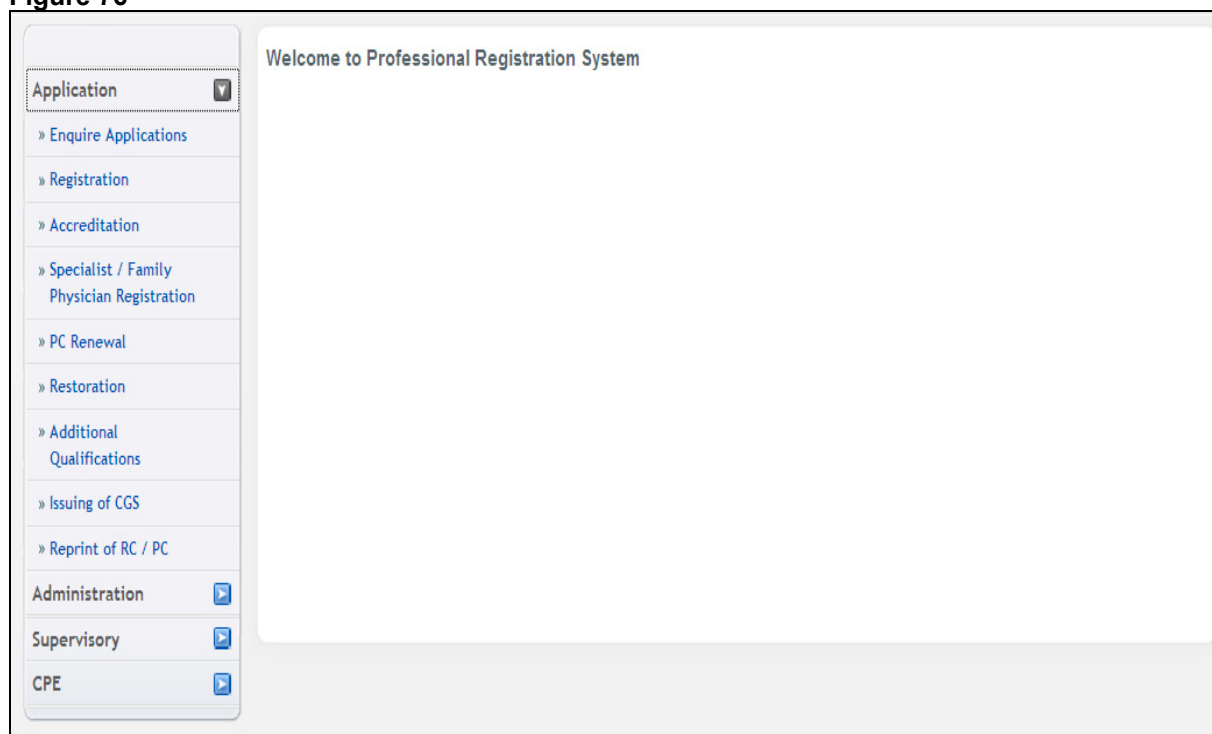
- Optional:
 - Click on [\[email\]](#) link to email SPC for any queries you may have pertaining to the application.
 - Click the [\[rate\]](#) hyperlink to rate the service
- Recommended: Click on [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.8. CGS Application

If you require a CGS, you may request for one through the Issuing of CGS function. You will first need to log in to PRS. Refer to [2.2 Login to the PRS](#) for more information.

After logging in successfully, click on the [\[Issuing of CGS\]](#) link to access the function.

Figure 76



The Issuing of CGS application form will be displayed.

Figure 77

Application for Certificate of Good Standing (CGS)

Click [here](#) for important instructions for applying Certificate of Good Standing online.
Note: All Fields marked with asterisk (*) are mandatory.

☐ I will require endorsement of additional form(s) from the Requesting Authority. I will be submitting the additional form(s) by
☐ Mail ☐ Hand

Reason for Application

*Reason	Studying Overseas
Depart to Country	China
Departure Date	07/03/2013
Return Date	13/03/2013

Details of Requesting Authority

Send By	Person to Address To	Address	Country	Requesting Authority	Action
Registered Mail	-	Ground Floor,Scala House,11 Torr St,Braddon Act 1612	Australia	Aus Pharmaceutical Board	Delete
Registered Mail	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	New Zealand	NZ Pharmaceutical Board	Delete
Registered Mail	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	United Kingdom	UK Pharmaceutical Board	Delete
Registered Mail	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	Italy	EU Pharmaceutical Board	Delete
Registered Mail	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	United States	ABC Pharmaceutical Board	Delete

Additional Documents

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf).
- Each file size must not exceed 1MB

Document Title

File

Documents Attached

Document Proof	Replace	Delete
Invitation Letter	Replace	Delete

☐ I declare that the particulars and information stated in this application are true, authentic and remains unchanged to date. To the best of my knowledge and belief, I have not withheld any material fact.

☐ I declare that I have not been charged with any offence in a court of law in any country for which the outcome is not yet known.

☐ I am also aware that it is a criminal offence to make any false statements and/or to provide any false information to the Singapore Pharmacist Council.

- Recommended: Click on the [\[here\]](#) link to download and read the instructions for submitting an Issuing of CGS application.
- Tick the checkbox if the requesting authority requires SPC to fill in additional forms.
 - Indicate whether you will submit the forms to SPC by mail or by hand
- Select the **Reason** for your CGS request.

- (Optional): Select the overseas country you will be departing to, if applicable.
- (Optional): Enter the **Departure Date**.
- (Optional): Enter the **Return Date**.
- Click on the [\[Add Requesting Authority\]](#) button to open a pop-up the window to add a Requesting Authority. The Add Requesting Authority form will be displayed.

Figure 78

Details of Requesting Authority

*Send By --Select Here--

Name of Requesting Authority (0/255)

Person to Address To (0/150)

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Country --Select Here--

Save **Cancel**

To add Requesting Authority

- Select the method to **Send By**.
 - If you have selected “self-collection”, you will be required to provide the reason in the text box that appears.
- Enter the **Name of Requesting Authority**.
- (Optional): Enter the **Person to Address to**.
- Enter the **Address Line 1**.
- (Optional): **Enter Address Line 2**, if applicable.
- (Optional): **Enter Address Line 3**, if applicable.
- (Optional): **Enter Address Line 4**, if applicable.
- Select the **Country**.
- Click on the [\[Cancel\]](#) button to discard the document and close the window.
- Click on the [\[Save\]](#) button.

Back on the CGS – Form main page:

- Tip: Click on the link in the Requesting Authority column if you wish to make changes to the respective requesting authority
- Tip: Click on the [\[Delete\]](#) link if you wish to remove the respective requesting authority from your application.
- Upload any necessary supporting documents to accompany your application.
- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button.

If the inputs pass the required validation checks, the confirmation page will be displayed.

Figure 79

CGS - Form
Confirmation
Payment
Acknowledgement

Application for Certificate of Good Standing (CGS)

Reason for Application

Reason	Studying Overseas
Depart to Country	China
Departure Date	07/03/2013
Return Date	13/03/2013

Details of Requesting Authority

Requesting Authority	Person to Address To	Address	Country	Send By
Aus Pharmaceutical Board	-	Ground Floor,Scala House, 11 Torr St,Braddon Act 1612	Australia	Registered Mail
NZ Pharmaceutical Board	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	New Zealand	Registered Mail
UK Pharmaceutical Board	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	United Kingdom	Registered Mail
EU Pharmaceutical Board	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	Italy	Registered Mail
ABC Pharmaceutical Board	-	Ground Floor,Lalya Villa , 18 Kent St,Braddon Ave	United States	Registered Mail

File

[Document Proof](#)

[Invitation Letter](#)

Confirm

To proceed to the Payment page:

- Tip: You may click on the **[CGS - Form]** link at the top of the page to return to the previous page to make changes, if necessary.
- Click on the **[Confirm]** button.

The Payment page will be displayed.

Figure 80

Application for CGS – Form
Confirmation
Payment
Acknowledgement

Application for CGS

Please note that the following fee(s) is/are non-refundable

Fee Type	Unit Price (SGD)	Quantity	Amount Due (SGD)
Application for CGS	XX.XX	4	YY.YY

Proceed

To proceed to the Acknowledgement page:

- Click the **[Proceed]** button. The BillCollect payment interface will be displayed. Follow the on screen instructions to make your payment.

Once payment has been completed, the Acknowledgement page will be displayed.

Figure 81

Application for CGS – Form

Confirmation

Payment

Acknowledgement

Application for Certificate of Good Standing (CGS)

Please be informed that your Application for CGS / Verification of Registration/Enrolment request has been submitted to Singapore Pharmacy Council on 06/03/2013. Please print/save a copy of this acknowledgement for your reference.

Aus Pharmaceutical Board	SPC--20130306-0022-CGS
NZ Pharmaceutical Board	SPC--20130306-0023-CGS
UK Pharmaceutical Board	SPC--20130306-0024-CGS
EU Pharmaceutical Board	SPC--20130306-0025-CGS
ABC Pharmaceutical Board	SPC--20130306-0026-CGS

You may check the status of your application online using the same User ID and password. For any query, please email to enquiries@spc.gov.sg and quote the above application no.

[Rate this service](#)

Print

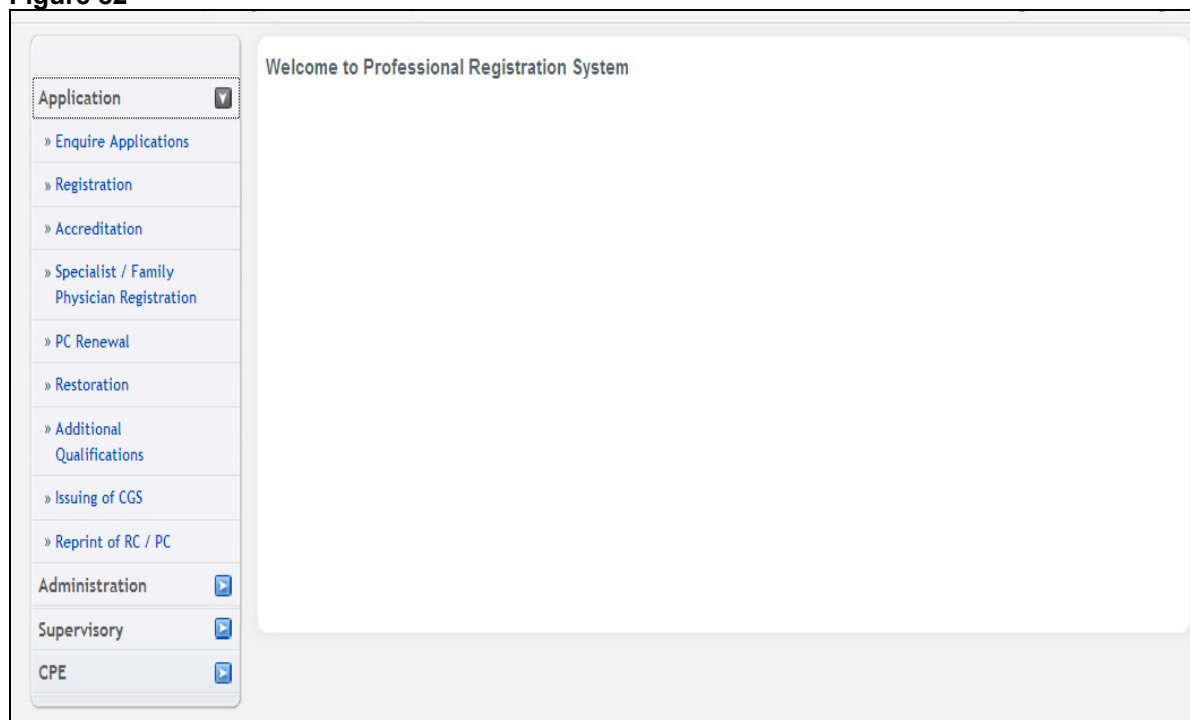
- Optional:
 - Click on [\[email\]](#) link to email SPC for any queries you may have pertaining to the application.
 - Click on [\[Rate this Service\]](#) hyperlink to rate this service
- Recommended: Click on [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.9. Reprint of RC / PC Application

You may use the Reprint of PC / RC function to request for a reprint or certified true copy of your PC / RC. You will first need to login to PRS. Refer to [2.2 Login to the PRS](#) for more information.

After logging in, click on the [\[Reprint of RC / PC\]](#) link.

Figure 82



The Reprint of RC / PC application form will be displayed.

Figure 83

[Reprint RC/PC – Form](#) [Confirmation](#) [Payment](#) [Acknowledgement](#)

Reprint of PC and RC

Click [here](#) for important Instructions for requesting Reprint of RC/PC.

All fields marked with asterisk (*) are mandatory

General Information

Registration No.	P71234X
Name	John Li Xinsheng
Registration Type	Full Registration

Application For Reprint Of RC/PC

*Request for:

☐ Replacement of Original Registration Certificate, for:

☐ Register of Pharmacists

☐ Replacement of Original Practising Certificate

☐ Certified True Copy of Registration Certificate

☐ Register of Pharmacists, no. of copies

*Reason for Application

*Send Certificate by

Additional Documents

Document Title	<input type="text" value="--Select Here--"/>
Upload Document	<input type="text"/> <input type="button" value="Browse"/> <input type="button" value="Attach"/>

Attached Documents

Police Report	Replace	Delete
Statutory declaration	Replace	Delete

To proceed to the Confirmation page:

- Recommended: Click on the [\[here\]](#) link to download and read the instructions for submitting a Reprint of PC / RC application.
- Tick the respective checkboxes to indicate the service you require.
- Select the **Reason for Application**.
 - If others, enter the reason on the text box that appears.
- Select the method to **Send Certificate By**.
 - If sending by mail, select the address to send to.
- Upload the necessary supporting documents, if any, to accompany your application.
- Click on the [\[Save\]](#) button to save this application as a draft. You can retrieve the draft later on from Enquire Applications. Refer to [2.11 Enquire Applications](#) for more information.
- Click on the [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the Confirmation page will be displayed.

Figure 84

[Reprint RC/PC – Form](#)
[Confirmation](#)
[Payment](#)
[Acknowledgement](#)

Reprint of PC and RC

General Information

Registration No.	P71234X
Name	John Li Xinsheng
Registration Type	Conditional Registration

Application For Reprint Of RC/PC

Request for:	
1. Replacement of Original Registration Certificate for Register of Pharmacists	
2. Replacement of Original Practice Certificate	
Reason for Application	Misplaced
Send Certificate by	Self-Collection
Mailing Address	N.A.

Documents Uploaded

[Police Report](#)

[Statutory declaration](#)

[Confirm](#)

To proceed to the Payment page:

- Tip: You may click on the [\[Reprint RC/PC - Form\]](#) link at the top of the page to return to the previous page to make changes, if necessary.
- Click on the [\[Confirm\]](#) button.

The Payment page will be displayed.

Figure 85

[Reprint RC/PC – Form](#)
[Confirmation](#)
[Payment](#)
[Acknowledgement](#)

Reprint of PC and RC

Please note that the following fee(s) is/are non-refundable

Fee Type	Unit Price (SGD)	Quantity	Amount Due (SGD)
Replacement of Original Registration Certificate	XX.XX	1	XX.XX
Replacement of Original Practice Certificate	YY.YY	1	YY.YY

[Proceed](#)

To proceed to the last stage of the application (i.e.: Acknowledgement)

- Click on the [\[Proceed\]](#) button. The BillCollect payment interface will be displayed. Follow the on screen instructions to make your payment.

Once payment has been completed, the Acknowledgement page will be displayed.

Figure 86

Reprint RC/PC – Form Confirmation Payment **Acknowledgement**

Reprint of PC and RC

Acknowledgement for Reprint of Certificate

Please be informed that your application has been submitted to Singapore Pharmacy Council on 07/03/2013. Please print / save a copy of this acknowledgement for your reference.

Your application number(s) is/are:

Replacement of Original Registration Certificates: SPC-20130307-0048-RRC
Replacement of Original Registration Certificates: SPC-20130307-0049-RPC

You may check the status of your application online using the same User ID. and password. For any query, please email to enquiries@spc.gov.sg and quote the above application no(s).

[Rate this service](#)

Print

- Optional:
 - Click on [\[email\]](#) link to email SPC on any queries pertaining to the application.
 - Click on [\[Rate this Service\]](#) hyperlink to rate the service
- Recommended: Click on [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.10. Supervisory

2.10.1. Assessment Report Request

An email will be sent to the supervisor when the HPE officer makes a request for the submission of the assessment report. Upon receiving the email, the supervisor can proceed to the PRS website provided in the email to proceed with the submission of the assessment report.

Figure 87

Dear Miss Orange,

This is to inform you that the supervisory assessment of Jerry is due on **28/06/2013**. The period of assessment is **13/03/2013 – 20/06/2013**.

Do complete the assessment by 05/07/2013

As an assessor, your duty is to provide an accurate and objective assessment of the registered pharmacist by selecting the appropriate grade.

You are encouraged to write at least 1 -2 points on the performance of the pharmacist to justify the grade given, especially for "Unsatisfactory" grades, the reason(s) must be stated.

I wish to take this opportunity to thank you for your contributions in being a supervisor to the above named person.

Jerry: Would appreciate if you could just remind your supervisor to complete the assessment form.

Singapore Pharmacy Council
16 College Road, #01-01
College of Medicine Building
Singapore 169854
Tel No: (65) 6478 5068
Fax No :(65) 6478 5069
Email Address:enquiries@spc.gov.sg

Example of an email for request of assessment report

The login page will be displayed on the web browser as shown below. The supervisor will be required to login using their user I D and password.

Figure 88

[Instructions for Authorised Users](#)

Healthcare Professionals:
You may login via SingPass or your User ID and password. For first time login users, please click [here](#) to view the documentation required for processing.


HR Personnel:
You may login via your User ID and password. If you do not have an account, please click [here](#) to download the form and mail the signed form to enquiries@spc.gov.sg.

CPE Providers
You may login via your User ID and password. If you do not have an account, please click [here](#) to submit your application for an online account.

User ID ?

Password

[Reset Password](#)


Alternatively, you can login using 


Login screen for PRS


The screenshot below shows the page after the supervisor has logged in. To proceed, the supervisor can click on “Pending Assessment Reports” hyperlink to view the list of pending assessment reports currently assigned to him.

Figure 89

Welcome to PRS


Application 

Administration 

Supervisory 

» Pending Assessment Reports

» Check Submission Status

CPE 

Landing page for supervisor

On the pending assessment report page, the supervisor can may proceed by clicking on the S/N (as circled below) to begin working on the assessment report.

Figure 90

Pending Assessment Reports							
S/N	Supervisee	Registration Type	Type of Register	Level of Supervision	Assessment Period	Submission Due Date	Status
1	Jerry (PP5066C)	Provisional Registration		L1	13/03/2013 - 20/06/2013	28/06/2013	-

Pending assessment report page with pending assessments

The following shows an example of an assessment report that is needed to be completed. User will have to fill in the respective details (Grades and comments) before submitting the report.

Figure 91

ASSESSMENT REPORT				
SUPERVISEE INFORMATION				
Name	Jerry	Registration No.	PP5066C	
Employer	KK Women's and Children's Hospital	Appointment	Academic Manager	
Practice Place - Institution	KK Women's and Children's Hospital	Practice Place - Department	Depart 2	
Registration Status	On Register	Registration Type	Provisional Registration	
Restriction	-	Condition	-	
Level of Supervision	L1	Assessment No.	1	
Assessment Start Date	13/03/2013	Assessment End Date	20/06/2013	
Assessment Period Change Request (if any)				
		(0/500)		
For instructions on completing the assessment report, click here				
ASSESSMENT DETAILS				
Criteria	Grade	Comments, if any		
1. ASSESSMENT OF PHARMACIST				
1.1 PROFESSIONAL EXPERTISE Pharmacist demonstrates the ability to apply his/her pharmaceutical knowledge in the course of duty, e.g. drug information, legal requirements, dispensing skills, drug distribution, etc	--Select Here--	(0/2000)		
1.2 ETHICAL BEHAVIOUR IN PHARMACY PRACTICE Pharmacist demonstrates a high standard of ethical behaviour within the pharmacy practice. Examples are professional integrity, patient confidentiality and good professional conduct.	--Select Here--	(0/2000)		
1.3 COMMUNICATION (ORAL & WRITTEN) SKILLS Pharmacist demonstrates his / her ability to establish adequate, effective communication with patients in handling enquiries and counseling. This includes communication with prescriber or other healthcare professionals. Ability to write well and clearly e.g. reports or presentations.	--Select Here--	(0/2000)		
1.4 QUALITY OF WORK Pharmacist demonstrates the ability to meet timelines and produce work of acceptable quality.	--Select Here--	(0/2000)		
1.5 PROFESSIONALISM Pharmacist demonstrates a sense of respect towards his patients and fellow colleagues as well as honesty and responsibility in his / her work and profession.	--Select Here--	(0/2000)		
1.6 GENERAL CONDUCT Pharmacist demonstrates good conduct in punctuality, courtesy, co-operation, initiative, good working attitudes as well as able to work independently with motivation.	--Select Here--	(0/2000)		
2. Overall Rating:	--Select Here--	(0/2000)		
3. General Comments:		(0/2000)		
ATTACH DOCUMENT				
*Document Title		--Select Here--		
Other Document Title				
*File		Browse..		
Upload				
UPLOADED DOCUMENTS				
Document Title	File Name	Attached By	Attached On	Action
SUPERVISOR INFORMATION				
Name	Orange	Regn No.	P09205C	
Type of Register	Regn Type	Regn Start Date	Register Status	
Pharmacist	Full Registration	13/03/2013	On Register	
Office No.	-	Mobile No.	-	
Email	fylau@ncs.com.sg	SF Training	No	
Save Submit Print Cancel				

Example of an assessment report

Upon submission of the report, the pending assessment report should be removed from the supervisors' Pending Assessments Report (Refer to screen below)

Figure 92

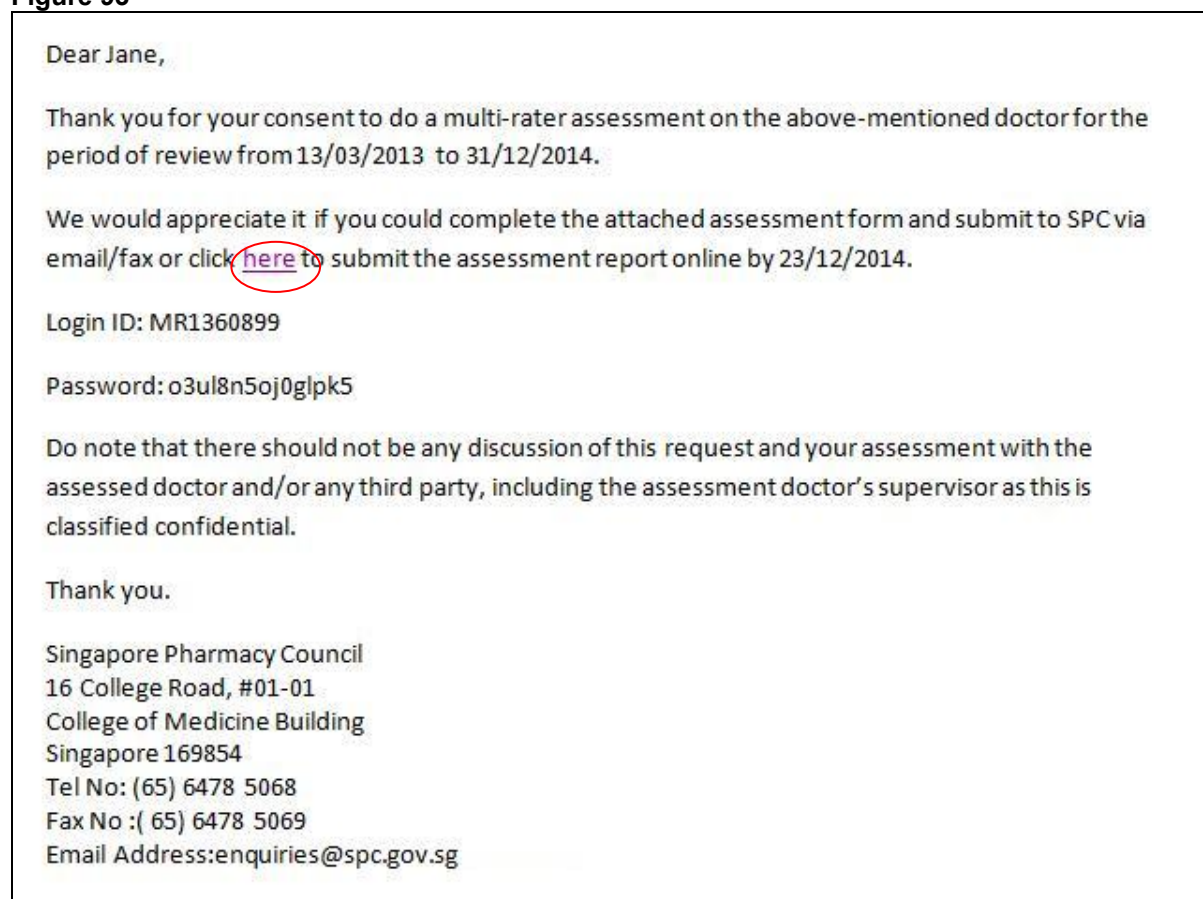
Pending Assessment Reports							
S/N	Supervisee	Registration Type	Type of Register	Level of Supervision	Assessment Period	Submission Due Date	Status
No matching records found.							

Pending assessment report page with no pending assessments

2.10.2. Multi-rater assessment Report Request

An email will be sent to the healthcare professional when the HPE officer makes a request for the submission of a multi-rater assessment report. Upon receiving the email, the user can proceed to the PRS website by clicking on the hyperlink provided in the email (as circle below) to proceed with the submission of the assessment report.

Figure 93



Sample of an email for a Multi-rater assessment report

Upon clicking on the hyperlink, the user will be directed to the login screen for the multi-rater assessment. To proceed, the professional should log in using the temporary user ID and password provided in the multi-rater assessment report request email

Figure 94

Instructions for Authorised Users

Healthcare Professionals:
You may login via SingPass or your User ID and password. For first time login users, please click [here](#) to view the documentation required for processing.


HR Personnel:
You may login via your User ID and password. If you do not have an account, please click [here](#) to download the form and mail the signed form to enquiries@spc.gov.sg.

CPE Providers
You may login via your User ID and password. If you do not have an account, please click [here](#) to submit your application for an online account.

User ID ?

Password

[Reset Password](#)

Alternatively, you can login using 

Login screen for multi-rater assessment report submission

Upon logging in successful with the temporary account, the multi-rater assessment will be loaded. The professional will be required to fill in all details (Grade and Comments) before submission of the report.

Figure 95

Submit Multi-rater Assessment Report

ASSESSEE INFORMATION

Name	Jerry	Registration No.	PP5066C
Employer	KK Women's and Children's Hospital	Appointment	Academic Manager
Practice Place - Institution	KK Women's and Children's Hospital	Practice Place - Department	-
Assessment Start Date	13/03/2013	Assessment End Date	31/12/2014

ASSESSOR INFORMATION

Name	Jane		
Appointment	senior pharmacist	Email	fylau@ncs.com.sg
Office No.	-	Mobile No.	-
*Relationship to Assessee	--Select Here--	*Frequency of Contact	--Select Here--

For instructions on completing the assessment report, click [here](#)

ASSESSMENT DETAILS

Criteria	Grade	Comments, if any
1. PROFESSIONAL EXPERTISE	--Select Here--	<div></div> (0/2000)
2. COMMUNICATION SKILLS (with Patients)	--Select Here--	<div></div> (0/2000)
3. COMMUNICATION SKILLS (with Peers)	--Select Here--	<div></div> (0/2000)
4. WRITTEN COMMUNICATIONS	--Select Here--	<div></div> (0/2000)
5. COLLABORATION AND TEAMWORK	--Select Here--	<div></div> (0/2000)
6. CONSULTATION	--Select Here--	<div></div> (0/2000)
7. LEADERSHIP QUALITIES	--Select Here--	<div></div> (0/2000)
8. PROFESSIONALISM AND COMMITMENT	--Select Here--	<div></div> (0/2000)
9. ABILITY TO WORK UNDER STRESS	--Select Here--	<div></div> (0/2000)
10. ACCEPTANCE OF RESPONSIBILITY	--Select Here--	<div></div> (0/2000)

An example of a Multi-rater assessment report.
Upon successful submission of the report, the professional will be notified by the system of the successful submission of the multi-rater report.

Figure 96

The multi rater assessment has been successfully submitted.
Thank you for your participation as an assessor in the Multi Rater assessment of the professional.

An example of an on-screen message of a successfully submitted MR report

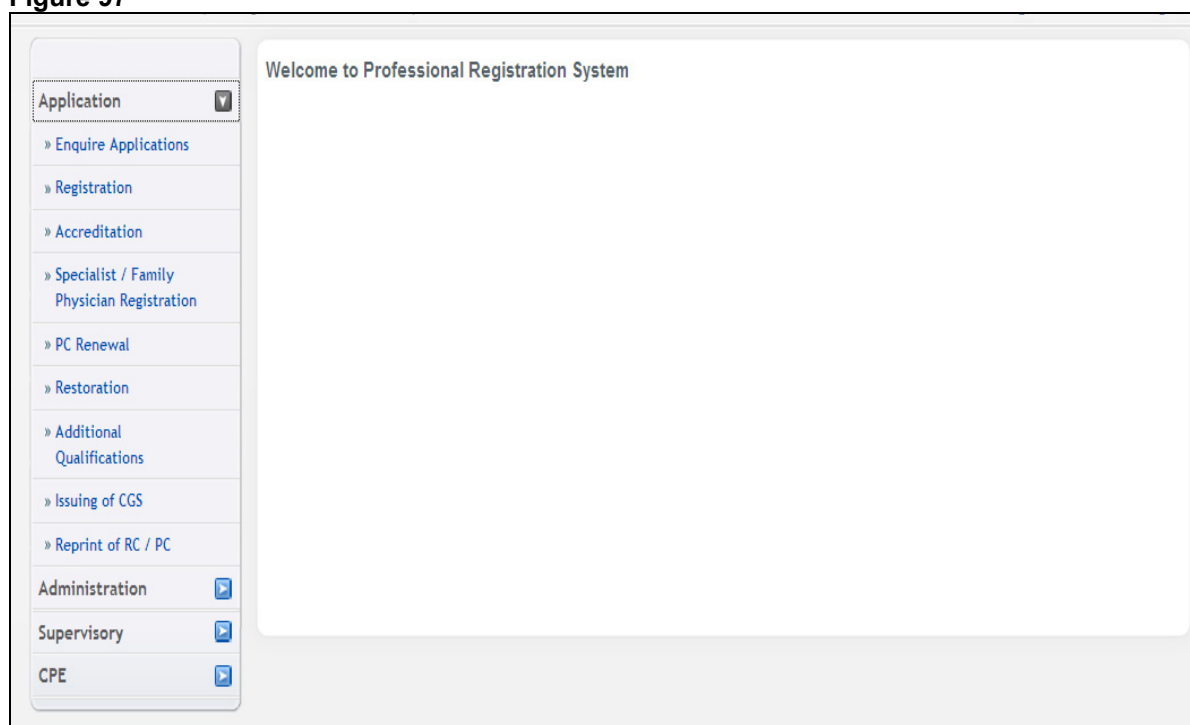
2.11. Enquire Applications

You can utilize the Enquire Applications function to do the following:

- Continue your saved drafts
- View the details of submitted applications
- Upload documents for applications where the current status is “Pending Supporting Documents”.

You will first need to login to PRS. Refer to [2.2 Login to the PRS](#) for more information. After logging in, click on the [\[Enquire Application\]](#) link.

Figure 97



The Enquire Applications page will be displayed as follows.

Figure 98

Applications Submitted				
Application No.	Application Type	Date of Submission	Application Status	Remarks
SPC-20110915-1234-UP	Update Particulars	01/03/2000	Pending Supporting Documents	Kindly click here to attach all the required documents. Printing of receipts: SPC-2011-000001
SPC-20121212-9994-EXM	Examination	12/12/2012	Pending Supporting Documents	Kindly click here to attach all the required documents. Printing of receipts: SPC-2011-000001
SPC-20121212-9994-EXM	Examination	-	Result Released	-
SPC-20110916-1235-AQ	Additional Qualifications	02/02/2000	Approved	-
---	Specialist Registration	03/01/2000	Draft	-
SPC-20110917-1237-CGS	CGS	03/01/2000	Pending Supporting Documents	Kindly click here to attach all the required documents.
SPC-20110917-1238-CGS	CGS	03/01/2000	Approved	-
---	Accreditation	04/01/2000	Draft	-
SPC-20110919-1240-NPL	No Pay Leave	05/01/2000	Pending Supporting Documents	Kindly click here to attach all the required documents.
SPC-20110920-1241-RRC	Reprint RC/PC	06/06/2000	Approved	-
---	PC Renewal	03/01/2000	Draft	-
SPC-20110920-1241-ROR	Restoration of Registration	06/06/2000	Approved	-
---	Registration	07/07/2000	Draft	-

Carrying on with a draft:

- Click on the link in the Application No. column, where the Application Status is "Draft". The application form will be loaded and you may proceed with filling in the application.

Viewing the details of submitted applications:

- Click on the link in the Application No. column, where the Application Status is not "Draft". The details you entered for the submitted application will be displayed. They will be read only and non-editable.

Uploading of additional supporting documents:

- Click on the [\[here\]](#) link in the Remarks column the Application Status is "Pending Supporting Documents".

The Attach Document form will be displayed as follows.

Figure 99

[Enquire Applications - Part 1](#)
[Part 2](#)
[Acknowledgement](#)

Note:

- File must be in JPEG(.jpg or .jpeg), PDF(.pdf)
- Each file size must not exceed 1MB

Application No.: SPC-20110917-1236-EXM

Remarks

Please attach letter of offer.

Additional Documents

Document Title	--Select Here--	
Upload Document		Browse Attach

Documents Attached		
Employment Pass	Replace	Delete
Testimonial	Replace	Delete

[Proceed](#)

To proceed to the Acknowledgement page:

- Select the **Document Title**.
 - If others, enter the document title in the text box that appears.
- Click the [\[Browse\]](#) button. A file dialog box will appear. Select the file you wish to upload.
- Click on the [\[Open\]](#) button.
- Click on the [\[Attach\]](#) button. The document will appear in the Documents Attached table.
- Tip: To view uploaded documents, click on the hyperlink for the document title.
- Tip: Click on the [\[Replace\]](#) link to replace the respective document.
- Tip: Click on the [\[Delete\]](#) link to remove the respective document.
- Click on the [\[Proceed\]](#) button.

The Acknowledgement form will be displayed as follows.

Figure 100

Acknowledgement for Upload of Additional Documents

Please be informed that the additional documents have been submitted successfully to Singapore Pharmacy Council on 01/01/2001. Please print / save a copy of this acknowledgement for your reference.

Your application no. is SPC-20110917-1236-EXM.

You may check the status of your application online using the same User ID and password. For any query, please email to enquiries@spc.gov.sg and quote the above application no.

[Print](#)

- Optional: Click on the [\[email\]](#) link to email SPC for any enquiries pertaining to the application.
- Recommended: Click on the [\[Print\]](#) button print a copy of the acknowledgement page.

2.12. Professional Search

2.13.1 Search by Name

The menu on the top displays the functions you have access to. To make a Professional Search by Name, click on the [Search by Name] menu item.

The Search by Name page will be displayed as follows.

Figure 101

Search by Name Search by Location Search by Region

Name ☐ Names starting with...

Name of Place of Practice

[More Search Options](#)

Registration Number (Optional)

Search Details

Provide information about the Professional that you are searching for

- Enter **Name** and/or enter **Name of Place of Practice**
- Should you wish to search for the Name field which starts with a particular set of characters, tick the **Names starting with...** after entering them in the **Name** field.
- Select the type of Professional.
- Should you wish to search for the professional using his/her Registration Number you can:
 - Click on the [[More Search Options](#)] link then Enter Registration Number.
- Click on the [[Search](#)] button

The records will be displayed as follows.

Figure 102

Displaying 1 - 6 of 6 records	
David Tan (P09196J) View more details	
John Tan (P09156A) View more details	
Tan Yang Yang (P09163D) View more details	
cass tan (P09168E) View more details	
jean tan (P09162F) View more details	
samuel tan (P09165J) View more details	
Page 1	[First] [Previous] [Next] [Last]
Back to Top Reset Search	

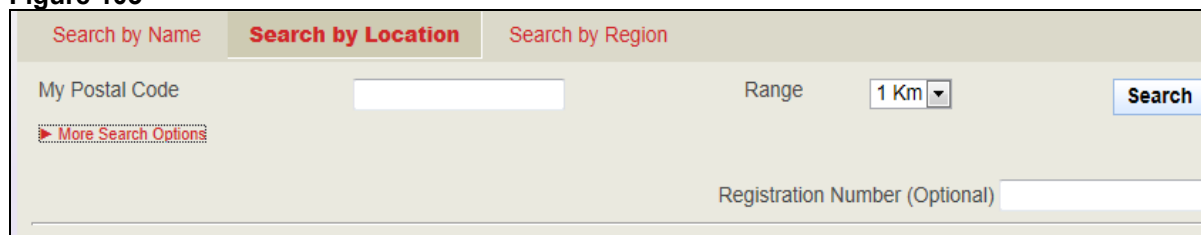
- Click on the [\[View more details\]](#) link to view the respective Professional
- Click on the [\[Back to Top\]](#) link to return to the top of the page.
- Click on the [\[Reset Search\]](#) link to do a search again.
- Click on the links at the bottom right to navigate through the pages.

2.13.2 Search by Location

The menu on the top displays the functions you have access to. To make a Professional Search by Location, click on the [\[Search by Location\]](#) menu item.

The Search by Location page will be displayed as follows.

Figure 103



The screenshot shows a web interface for searching professionals. At the top, there are three tabs: 'Search by Name', 'Search by Location' (which is highlighted), and 'Search by Region'. Below the tabs, there is a search form. On the left, there is a label 'My Postal Code' followed by a text input field. To the right of this is a 'Range' label followed by a dropdown menu currently set to '1 Km'. Further right is a blue 'Search' button. Below the 'My Postal Code' field, there is a red link that says 'More Search Options'. At the bottom right of the form, there is a label 'Registration Number (Optional)' followed by another text input field.

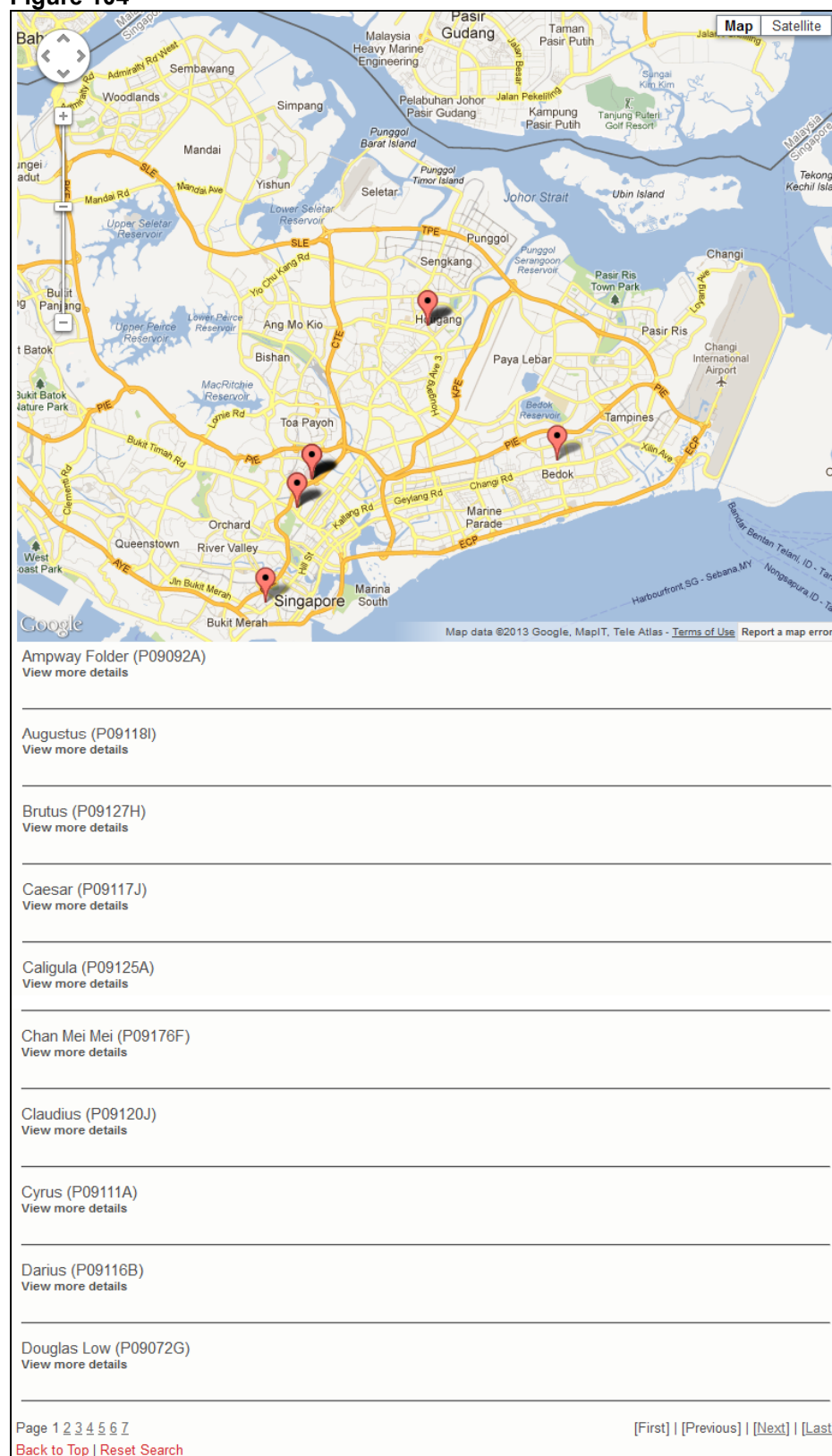
Search Details

Provide information about the Professional that you are searching for

- Enter **Postal Code** and/or enter **Range**.
- Select the type of Professional.
- Should you wish to search for the professional using his/her Registration Number you can:
 - Click on the [\[More Search Options\]](#) link then Enter Registration Number.
- Click on the [\[Search\]](#) button

The records will be displayed as follows.

Figure 104



- Click on the [\[View more details\]](#) link to view the respective Professional
- Click on the page numbers to go to the page.
- Click on the [\[Back to Top\]](#) link to return to the top of the page.

- Click on the [\[Reset Search\]](#) link to do a search again.
- Click on the links at the bottom right to navigate through the pages.

2.13.3 Search by Region

The menu on the top displays the functions you have access to. To make a Professional Search by Region, click on the [\[Search by Region\]](#) menu item.

The Search by Region page will be displayed as follows.

Figure 105



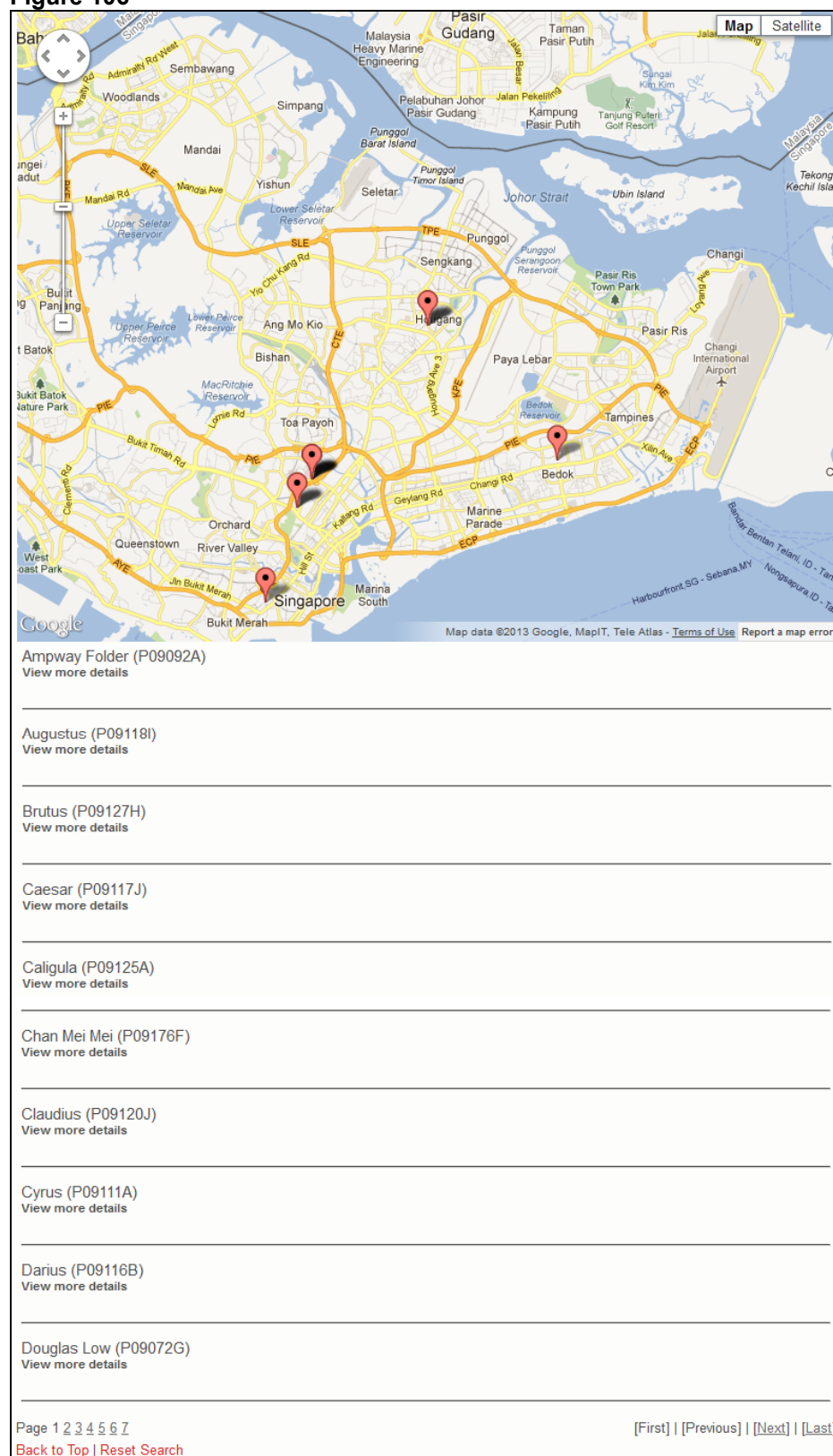
Search Details

Provide information about the Professional that you are searching for

- Select the Region by clicking on the different parts of the map.
- Select the type of Professional.
- Should you wish to search for the professional using his/her Registration Number you can:
 - Click on the [\[More Search Options\]](#) link then Enter Registration Number.
- Click on the [\[Search\]](#) button

The records will be displayed as follows.

Figure 106



- Click on the [\[View more details\]](#) link to view the respective Professional
- Click on the page numbers to go to the page.
- Click on the [\[Back to Top\]](#) link to return to the top of the page.
- Click on the [\[Reset Search\]](#) link to do a search again.

- Click on the links at the bottom right to navigate through the pages.

2.13.4 Details Page

The screenshot below shows the list of Professionals that are displayed. To view the details of the Professional, click on the [\[View more details\]](#) link.

Figure 107

Augustus (P09118I) View more details
Brutus (P09127H) View more details
Caesar (P09117J) View more details
Caligula (P09125A) View more details
Chan Mei Mei (P09176F) View more details
Claudius (P09120J) View more details
Cyrus (P09111A) View more details
Darius (P09116B) View more details
Douglas Low (P09072G) View more details
Page 1 2 3 4 5 6 7 Back to Top Reset Search
[First] [Previous] [Next] [Last]

Figure 108

Chan Siew May (P09001H)

Registration number	P09001H	Registration End Date	20/10/2013
Registration Date	21/10/2012	Practice Status	Active
Registration Type	Conditional Registration	Practising Certificate	31/12/2012
Practising Certificate Start Date	21/10/2012	End Date	
Qualifications	qq1 1984, UNIV 1, Singapore		

Type of Register: Pharmacist

Primary Place of Practice

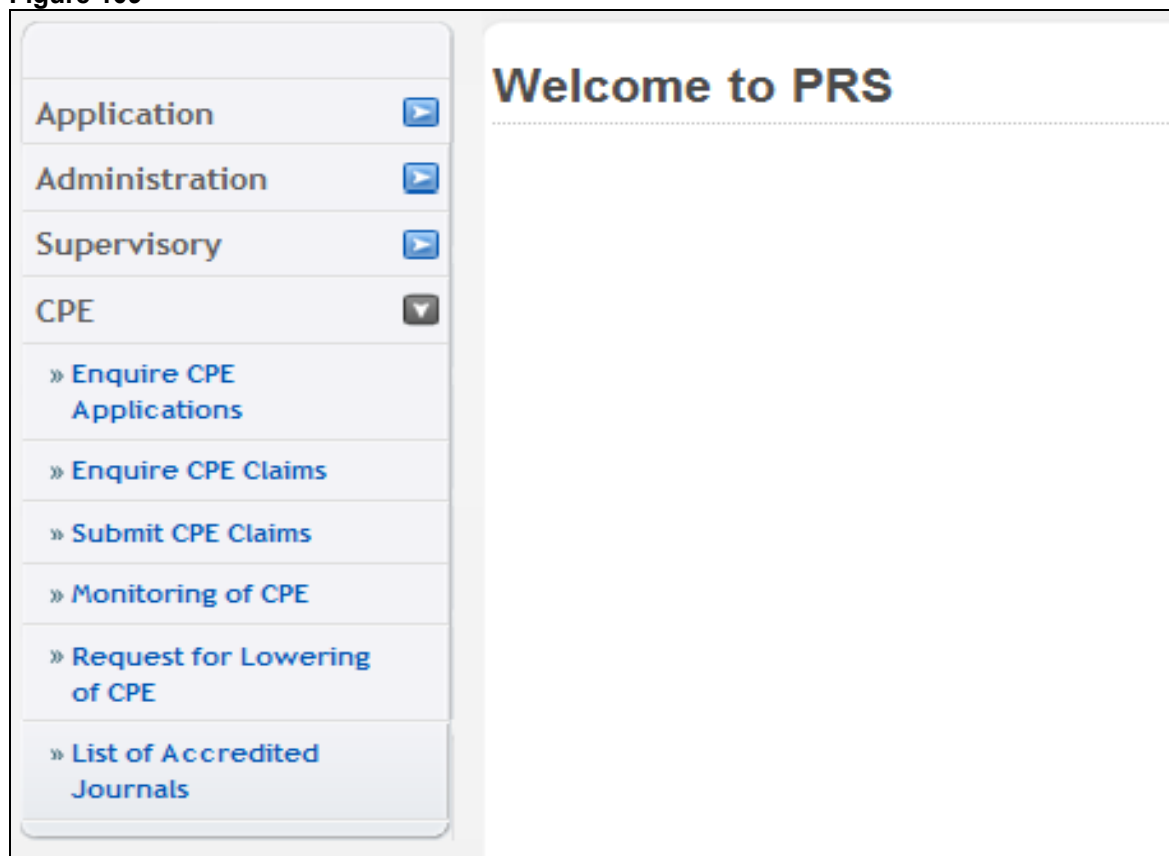
Name of Place of Practice	KK Women's and Children's Hospital
Address of Place of Practice	100 Kerdang Kerbau Hospital Bukit Timah Road #01 - 01 Singapore 229899
Tel	
Map	Google Map One Map

[Back to Top](#) | [Reset Search](#) | [Rate this service](#)

- Click on the [\[Back to Top\]](#) link to return to the top of the page.
- Click on the [\[Reset Search\]](#) link to do a search again.
- Click on the [\[Rate this service\]](#) link to rate the service of the Professional Search.

2.14. Submit CPE Claims

Figure 109



The menu on the left displays the functions you have access to. To submit a CPE Claim, click on the [\[CPE\]](#) menu item. Click on the [\[Submit CPE Claims\]](#) link

The CPE Claims form will be displayed as follows.

Figure 110

Category Claim Documents Confirmation Acknowledgement

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

*Category

--Select Here--

*Type of Activity

--Select Here--

Awarded CPE points (After Capping)

Category	CPE Points		
	Patient Care Points	Specialty Points	Non Patient Care Points
1A	0	0	0
1C	0	0	0
2A	0	0	0
2B	0	0	0
3A	0	0	0
3B	0	0	0

Claim Category Details

Category	Type of Activity	Role
1A	Grand Ward Rounds	Participant
	In-house CE activities	Participant
	Ad-hoc Events	Participant
1C	Overseas Events	Participant
2A	Journals	Main Author, Co-author
2B	Oral Presentation	Speaker, Co-author
	Poster Presentation	Speaker, Co-author
3A	Readings	-
	Online/Offline Education Programmes	-
3B	Post graduate Programmes	-

Proceed

To proceed to the next stage of the application (i.e.: Documents)

- Select the **Category**
- Select **Type of Activity**
- Click on the **Proceed** button

2.14.1. Category 1A (Grand Ward Rounds)

Figure 111

Category **Claim** Documents Confirmation Acknowledgement

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Grand Ward Rounds Credit Claim

Category	1A
Type of Activity	Grand Ward Rounds
*Role	Participant
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
*Event Title	
*Specialty	--Select Here--
*Venue	
*Event Date	dd/mm/yyyy
*Event Duration	--Select Here--
Additional Remarks	

Proceed

To proceed to the next stage of the application (i.e.: Confirmation)

- Select **Role**
- Select **Patient Care Subject**
- Select **Subject**
- Enter **Event Title**
- Select **Specialty**
- Enter **Venue**
- Enter **Event Date (dd/mm/yyyy)**
- Select **Event Duration**
- (Optional): Enter **Additional Remarks**
- Click on the **Proceed** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 112

Category Claim **Documents** Confirmation Acknowledgement

Submission of CPE Claims

Additional Documents

Document Title --Select Here--

File

Documents Attached

No document attached.

- Optional: Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claims\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 113

Category > Claim > Documents > **Confirmation** > Acknowledgement

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Grand Ward Rounds Credit Claim

Category	1A
Type of Activity	Grand Ward Rounds
Role	Participant
Patient Care Subject	Yes
Subject	Negotiation Skills
Event Title	1A Grand Ward Rounds 24 Jan
Specialty	Oncology Pharmacy
Venue	A
Event Date	11/01/2013
Event Duration	1<= X <2 Hrs
Additional Remarks	-
CPE Points	1

Documents Attached

[Confirm](#)

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the [\[Confirm\]](#) button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 114

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 1A has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-1A-3903
Type of Activity: Grand Ward Rounds
Activity Date : 11/01/2013
Activity Title: 1A Grand Ward Rounds 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.2. Category 1A (In-House)

Figure 115

The screenshot displays the 'Submission of CPE Claims' interface. At the top, a navigation bar includes 'Category', 'Claim' (highlighted), 'Documents', 'Confirmation', and 'Acknowledgement'. Below this, the title 'Submission of CPE Claims' is shown. A note states: 'Note: All Fields marked with asterisk (*) are mandatory.' The form is divided into two main sections: 'Registration Details' and 'Category of In-house CE activities Credit Claim'. The 'Registration Details' section contains a table with the following information: Registration No. (P09051D), Name (Nicholas Lim), Registered Specialty (-), Appointment (Associate Clinical Research Manager (11/11/1993)), and CPE Specialty (-). The 'Category of In-house CE activities Credit Claim' section contains a form with the following fields: Category (1A), Type of Activity (In-house CE activities), *Role (Participant), *Patient Care Subject (Yes/No), *Subject (--Select Here--), *Event Title (text input), *Specialty (--Select Here--), *Venue (text input), *Event Date (dd/mm/yyyy with a calendar icon), *Event Duration (--Select Here--), and Additional Remarks (text area with a character count of 0/500). A 'Proceed' button is located at the bottom left of the form.

Registration Details	
Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of In-house CE activities Credit Claim	
Category	1A
Type of Activity	In-house CE activities
*Role	Participant
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
*Event Title	
*Specialty	--Select Here--
*Venue	
*Event Date	dd/mm/yyyy
*Event Duration	--Select Here--
Additional Remarks	

Proceed

To proceed to the next stage of the application (i.e.: Confirmation)

- Select **Role**
- Select **Patient Care Subject**
- Select **Subject**
- Enter **Event Title**
- Select **Specialty**
- Enter **Venue**
- Enter **Event Date (dd/mm/yyyy)**
- Select **Event Duration**
- Optional: Enter **Additional Remarks**
- Click on the **Proceed** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 116

Category Claim **Documents** Confirmation Acknowledgement

Submission of CPE Claims

Additional Documents

Document Title --Select Here--

File

Documents Attached

No document attached.

- (Optional): Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

Figure 117

[Category](#) [Claim](#) [Documents](#) [Confirmation](#) [Acknowledgement](#)

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of In-house CE activities Credit Claim

Category	1A
Type of Activity	In-house CE activities
Role	Participant
Patient Care Subject	Yes
Subject	New Drugs and Therapies
Event Title	1A In-house CE activities
Specialty	Oncology Pharmacy
Venue	A
Event Date	11/01/2013
Event Duration	1<= X <2 Hrs
Additional Remarks	-
CPE Points	1

Documents Attached

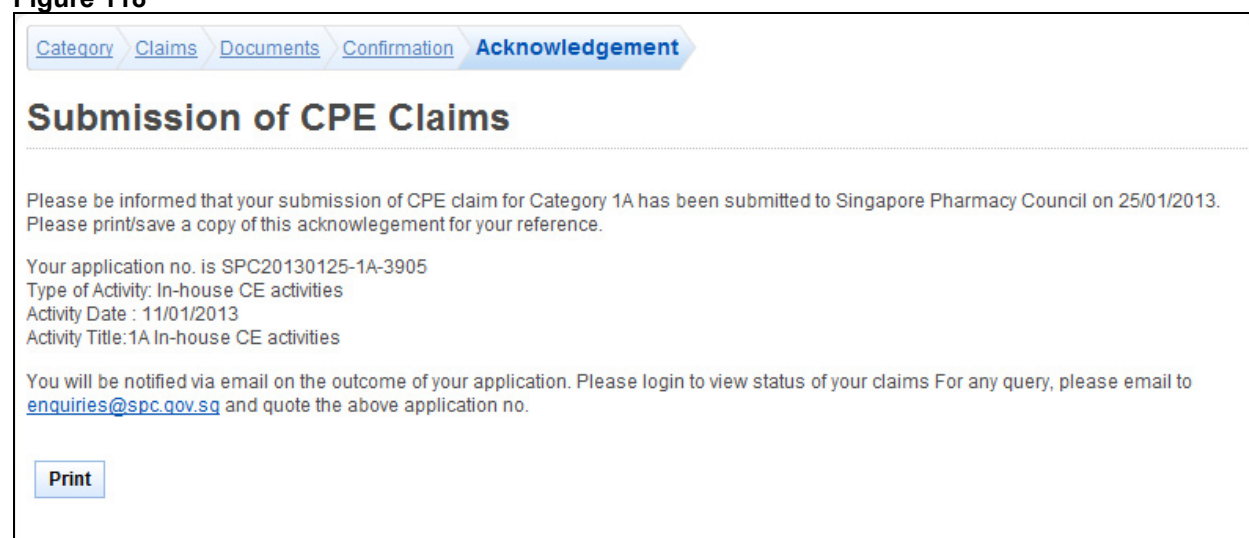
[Confirm](#)

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the [\[Confirm\]](#) button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 118



The screenshot shows a web interface with a navigation bar at the top containing five tabs: 'Category', 'Claims', 'Documents', 'Confirmation', and 'Acknowledgement'. The 'Acknowledgement' tab is selected and highlighted in blue. Below the navigation bar, the main heading is 'Submission of CPE Claims'. The content area contains the following text: 'Please be informed that your submission of CPE claim for Category 1A has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.' This is followed by application details: 'Your application no. is SPC20130125-1A-3905', 'Type of Activity: In-house CE activities', 'Activity Date : 11/01/2013', and 'Activity Title: 1A In-house CE activities'. A notification message states: 'You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.' At the bottom left of the content area, there is a 'Print' button.

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.3. Category 1A (Ad-hoc Events)

Figure 119

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Ad-hoc Events Credit Claim

Category	1A
Type of Activity	Ad-hoc Events
*Role	--Select Here--
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
*Type of Overseas Event	--Select Here--
*Event Specialty	--Select Here--
*Event Title	--Select Here--
*Organiser	
*Country	--Select Here--
*Venue	
*Event Start Date	dd/mm/yyyy
*Event End Date	dd/mm/yyyy
Speaker's Topic 1	
Additional Remarks	

Buttons: Refresh Duration, Add Speaker Topic, Proceed

To proceed to the next stage of the application (i.e.: Confirmation)

- Select **Role**
- Select **Patient Care Subject**
- Select **Subject**
- Select **Type of Overseas Event**
- Select **Event Specialty**
- Select **Event Title**
- Enter **Organiser**
- Enter **Country**
- Enter **Venue**
- Enter **Event Start Date (dd/mm/yyyy)**
- Enter **Event End Date (dd/mm/yyyy)**
- Press **[Refresh Duration]**
 - Selection **duration for each date**
- (Optional): Enter **Speaker's Topic 1**
- (Optional): Enter **Additional Remarks**
- Click on the **[Proceed]** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 120

The screenshot displays a web form titled "Submission of CPE Claims". At the top, there is a navigation bar with five tabs: "Category", "Claim", "Documents" (which is active and highlighted in blue), "Confirmation", and "Acknowledgement". Below the tabs, the form has a section titled "Additional Documents". This section contains a "Document Title" field with a dropdown menu currently showing "--Select Here--". Below this is a "File" field with a text input box, a "Browse.." button, and an "Attach" button. Underneath the "Additional Documents" section is a "Documents Attached" section, which currently displays the text "No document attached." At the bottom left of the form is a "Proceed" button.

- Optional: Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claims\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 121

Category
Claim
Documents
Confirmation
Acknowledgement

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Ad-hoc Events Credit Claim

Category	1A				
Type of Activity	Ad-hoc Events				
Role	Participant				
Patient Care Subject	No				
Subject	Regulatory Affairs				
Type of Overseas Event	Other Type of Overseas Event				
Type of Overseas Event (Others)	A				
Event Specialty	Oncology Pharmacy				
Event Title	Others				
Event Title (Others)	1A Ad-hoc Events 24 Jan				
Organiser	A				
Country	Singapore				
Venue	A				
Event Start Date	11/01/2013				
Event End Date	11/01/2013				
	<table> <thead> <tr> <th>Date</th> <th>Duration</th> </tr> </thead> <tbody> <tr> <td>11/01/2013</td> <td>1<= X <2 Hrs</td> </tr> </tbody> </table>	Date	Duration	11/01/2013	1<= X <2 Hrs
Date	Duration				
11/01/2013	1<= X <2 Hrs				
Speaker's Topic	-				
Additional Remarks	-				
CPE Points	1				

Documents Attached

[Proof of Attendance](#)

Confirm

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the **Confirm** button

The CPE Claims acknowledgement page will be displayed as follows

Figure 122

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 1A has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-1A-3906
Type of Activity: Ad-hoc Events
Activity Date : 11/01/2013
Activity Title: 1A Ad-hoc Events 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.4. Category 1C (Overseas Events)

Figure 123

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Ad-hoc Events Credit Claim

Category	1A
Type of Activity	Ad-hoc Events
*Role	--Select Here--
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
*Type of Overseas Event	--Select Here--
*Event Specialty	--Select Here--
*Event Title	--Select Here--
*Organiser	<input type="text"/>
*Country	--Select Here--
*Venue	<input type="text"/>
*Event Start Date	dd/mm/yyyy <input type="button" value="Calendar"/>
*Event End Date	dd/mm/yyyy <input type="button" value="Calendar"/>
Speaker's Topic 1	<input type="text"/> <input type="button" value="Add Speaker Topic"/>
Additional Remarks	<input type="text"/> (0/500)

To proceed to the next stage of the application (i.e.: Confirmation)

- Select **Role**
- Select **Patient Care Subject**
- Select **Subject**
- Select **Type of Overseas Event**
- Select **Event Specialty**
- Select **Event Title**
- Enter **Organiser**
- Enter **Country**
- Enter **Venue**
- Enter **Event Start Date (dd/mm/yyyy)**
- Enter **Event End Date (dd/mm/yyyy)**
- Press **[Refresh Duration]**
 - Select **Duration for the date**
- (Optional): Enter **Speaker's Topic 1**
- (Optional): Enter **Additional Remarks**
- Click on the **[Proceed]** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 124

Category Claim **Documents** Confirmation Acknowledgement

Submission of CPE Claims

Mandatory Documents

Document Title *Upload Document	Proof of Attendance	<input type="text"/>	Browse..	Attach
Document Title *Upload Document	Conference Event Details	<input type="text"/>	Browse..	Attach

Additional Documents

Document Title	--Select Here--			
File	<input type="text"/>	Browse..	Attach	

Documents Attached

No document attached.

Proceed

- Upload Mandatory Documents
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- (Optional): Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 125

Category
Claim
Documents
Confirmation
Acknowledgement

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Overseas Events Credit Claim

Category	1C				
Type of Activity	Overseas Events				
Role	Participant				
Patient Care Subject	No				
Subject	Good Distribution Practices				
Type of Overseas Event	Lecture				
Event Specialty	Oncology Pharmacy				
Event Title	Others				
Event Title (Others)	1C Overseas Events 24 Jan				
Organiser	A				
Country	Singapore				
Venue	A				
Event Start Date	11/01/2013				
Event End Date	11/01/2013				
	<table> <tr> <th>Date</th> <th>Duration</th> </tr> <tr> <td>11/01/2013</td> <td>1<= X <2 Hrs</td> </tr> </table>	Date	Duration	11/01/2013	1<= X <2 Hrs
Date	Duration				
11/01/2013	1<= X <2 Hrs				
Speaker's Topic	-				
Additional Remarks	-				
CPE Points	1				

Documents Attached

Proof of Attendance
Conference Event Details
Proof of Attendance

Confirm

- To proceed to the next stage of the application (i.e.: Acknowledgement)
 - Click on the **[Confirm]** button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 126

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 1C has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-1C-3907
Type of Activity: Overseas Events
Activity Date : 11/01/2013
Activity Title: 1C Overseas Events 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.5. Category 2A (Journals Publication)

Figure 127

The screenshot displays the 'Submission of CPE Claims' interface. At the top, there are navigation tabs: 'Category', 'Claim' (active), 'Documents', 'Confirmation', and 'Acknowledgement'. Below the tabs, the title 'Submission of CPE Claims' is centered. A note states: 'Note: All Fields marked with asterisk (*) are mandatory.' The form is divided into two main sections: 'Registration Details' and 'Category of Journals Credit Claim'.

Registration Details:

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Journals Credit Claim:

Category	2A
Type of Activity	Journals
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
Journal Type	--Select Here--
*Specialty	--Select Here--
*Journal Name	--Select Here--
*Paper Title	<input type="text"/>
*Role	--Select Here--
Publisher	<input type="text"/>
*Publication Year	<input type="text"/> <input type="checkbox"/> Not Published
Publication Date	dd/mm/yyyy <input type="button" value="Calendar"/>
Volume / Issue No	<input type="text"/>
Additional Remarks	<input type="text"/> (0/500)

At the bottom left of the form is a blue 'Proceed' button.

To proceed to the next stage of the application (i.e.: Documents)

- Select **Patient Core Subject**
- Select **Subject**
- Select **Journal Type**
- Select **Specialty**
- Select **Journal Name**
- Enter **Paper Title**
- Select **Role**
- (Optional): Enter **Publisher**
- Enter **Publication Year (yyyy)**
- (Optional): Enter **Volume/Issue No.**
- (Optional): Enter **Additional Remarks**
- (Optional): Enter **Publication Date**
- Click on the **[Proceed]** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 128

The screenshot shows a web form titled "Submission of CPE Claims" with a navigation bar at the top containing "Category", "Claim", "Documents" (highlighted), "Confirmation", and "Acknowledgement". The form is divided into three main sections: "Mandatory Documents", "Additional Documents", and "Documents Attached".

Mandatory Documents

This section contains a "Document Title" field, a "Copy of Article" label, and an "*Upload Document" field. To the right of the upload field are "Browse.." and "Attach" buttons.

Additional Documents

This section contains a "Document Title" field, a dropdown menu with "--Select Here--", and a "File" field. To the right of the file field are "Browse.." and "Attach" buttons.

Documents Attached

This section shows a message: "No document attached." Below this is a "Proceed" button.

- Upload Mandatory Documents
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Optional: Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the file to upload.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

Figure 129

Category

Claim

Documents

Confirmation

Acknowledgement

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Journals Credit Claim

Category	2A
Type of Activity	Journals
Patient Care Subject	Yes
Subject	Negotiation Skills
Journal Type	International
Specialty	Oncology Pharmacy
Journal Name	American Journal of Health-System Pharmacists
Paper Title	2A Journals 24 Jan
Role	Co-author
Publisher	-
Publication Year	2013
Publication Date	11/01/2013
Volume / Issue No	-
Additional Remarks	-
CPE Points	3

Documents Attached

[Copy of Article](#)

Confirm

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the **[Confirm]** button

Figure 130

The CPE Claims acknowledgement page will be displayed as follows.

Category Claims Documents Confirmation **Acknowledgement**

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 2A has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-2A-3908
Type of Activity: Journals
Activity Date : 11/01/2013
Activity Title: American Journal of Health-System Pharmacists - 2A Journals 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the **[email]** link to email SPC for any queries
- Recommended: Click on the **[Print]** button to print out a copy of the acknowledgement page.

2.14.6. Category 2B (Oral Presentation)

Figure 131

Category
Claim
Documents
Confirmation
Acknowledgement

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09165J
Name	samuel tan
Registered Specialty	-
Appointment	Acting Director (02/03/2000)
CPE Specialty	-

Category of Oral Presentation Credit Claim

Category	2B
Type of Activity	Oral Presentation
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
*Specialty	--Select Here--
*Presentation Title	
*Presentation Date	dd/mm/yyyy
*Event Title	
*Venue	
*Country	--Select Here--
*Role	--Select Here--
Additional Remarks	

(0/500)

Proceed

To proceed to the next stage of the application (i.e.: Documents)

- Select **Patient Core Subject**
- Select **Subject**
- Select **Specialty**
- Enter **Presentation Title**
- Enter **Presentation Date**
- Enter **Event Title**
- Enter **Venue**
- Select **Country**
- Select **Role**
- Optional: Enter **Additional Remarks**
- Click on the **[Proceed]** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows

Figure 132

Category Claim **Documents** Confirmation Acknowledgement

Submission of CPE Claims

Mandatory Documents

Document Title	Participation Evidence
*Upload Document	<input type="text"/> Browse.. Attach
Document Title	Presentation Summary
*Upload Document	<input type="text"/> Browse.. Attach

Additional Documents

Document Title	--Select Here--
File	<input type="text"/> Browse.. Attach

Documents Attached

No document attached.

[Proceed](#)

- Upload Mandatory Documents
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- (Optional): Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 133

The screenshot displays the 'Confirmation' tab of the 'Submission of CPE Claims' page. It is divided into two main sections: 'Registration Details' and 'Category of Oral Presentation Credit Claim'. Below these is a 'Documents Attached' section with links to 'Participation Evidence' and 'Presentation Summary', and a 'Confirm' button.

Registration Details	
Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Oral Presentation Credit Claim	
Category	2B
Type of Activity	Oral Presentation
Patient Care Subject	No
Subject	Good Distribution Practices
Specialty	Oncology Pharmacy
Presentation Title	2B Oral Presentation 24 Jan
Presentation Date	11/01/2013
Event Title	2B Oral Presentation 24 Jan
Venue	A
Country	Singapore
Role	Speaker
Project Title	2B Oral Presentation 24 Jan
Additional Remarks	-
CPE Points	2

Documents Attached

[Participation Evidence](#)

[Presentation Summary](#)

Confirm

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the **[Confirm]** button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 134

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 2B has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-2B-3909
Type of Activity: Oral Presentation
Activity Date : 25/01/2013
Activity Title: 2B Oral Presentation 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.7. Category 2B (Poster Presentation)

Figure 135

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Poster Presentation Credit Claim

Category	2B
Type of Activity	Poster Presentation
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
*Specialty	--Select Here--
*Presentation Title	
*Presentation Date	dd/mm/yyyy
*Event Title	
*Venue	
*Country	--Select Here--
*Role	--Select Here--
*Project Title	
Additional Remarks	

Proceed

To proceed to the next stage of the application (i.e.: Documents)

- Select **Patient Core Subject**
- Select **Subject**
- Select **Specialty**
- Enter **Presentation Title**
- Enter **Presentation Date**
- Enter **Event Title**
- Enter **Venue**
- Select **Country**
- Select **Role**
- Enter **Project Title**
 - (Enter "NIL" if there is none)
- (Optional): Enter **Additional Remarks**
- Click on the **Proceed** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows

Figure 136

The screenshot displays a web form titled "Submission of CPE Claims". At the top, there is a navigation bar with tabs: "Category", "Claim", "Documents" (which is active), "Confirmation", and "Acknowledgement". Below the navigation bar, the form is divided into two main sections: "Mandatory Documents" and "Additional Documents".

Mandatory Documents: This section contains two rows of input fields. The first row is for "Participation Evidence" and the second is for "Presentation Summary". Each row has a "Document Title" label, an "*Upload Document" label, a text input field, and two buttons: "Browse.." and "Attach".

Additional Documents: This section contains a single row of input fields. It has a "Document Title" label, a "--Select Here--" dropdown menu, a "File" label, a text input field, and two buttons: "Browse.." and "Attach".

Below these sections is a "Documents Attached" section with a light blue header and a message "No document attached.". At the bottom of the form is a "Proceed" button.

- Upload Mandatory Documents
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Optional: Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 137

The screenshot displays the 'Submission of CPE Claims' confirmation page. At the top, there is a navigation bar with tabs: Category, Claim, Documents, Confirmation (highlighted), and Acknowledgement. Below the navigation bar, the title 'Submission of CPE Claims' is displayed. The page is divided into two main sections: 'Registration Details' and 'Category of Oral Presentation Credit Claim'. The 'Registration Details' section shows the following information: Registration No. P09051D, Name Nicholas Lim, Registered Specialty -, Appointment Associate Clinical Research Manager (11/11/1993), and CPE Specialty -. The 'Category of Oral Presentation Credit Claim' section shows the following information: Category 2B, Type of Activity Oral Presentation, Patient Care Subject No, Subject Good Distribution Practices, Specialty Oncology Pharmacy, Presentation Title 2B Oral Presentation 24 Jan, Presentation Date 11/01/2013, Event Title 2B Oral Presentation 24 Jan, Venue A, Country Singapore, Role Speaker, Project Title 2B Oral Presentation 24 Jan, Additional Remarks -, and CPE Points 2. Below these sections, there is a 'Documents Attached' section with two links: 'Participation Evidence' and 'Presentation Summary'. At the bottom of the page, there is a 'Confirm' button.

Registration Details	
Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Oral Presentation Credit Claim	
Category	2B
Type of Activity	Oral Presentation
Patient Care Subject	No
Subject	Good Distribution Practices
Specialty	Oncology Pharmacy
Presentation Title	2B Oral Presentation 24 Jan
Presentation Date	11/01/2013
Event Title	2B Oral Presentation 24 Jan
Venue	A
Country	Singapore
Role	Speaker
Project Title	2B Oral Presentation 24 Jan
Additional Remarks	-
CPE Points	2

Documents Attached

- [Participation Evidence](#)
- [Presentation Summary](#)

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the **[Confirm]** button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 138

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 2B has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-2B-3910
Type of Activity : Poster Presentation
Activity Date : 25/01/2013
Activity Title: 2B Poster Presentation 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.8. Category 3A (Readings)

Figure 139

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09165J
Name	samuel tan
Registered Specialty	-
Appointment	Acting Director (02/03/2000)
CPE Specialty	-

Category of Readings Credit Claim

Category	3A
Type of Activity	Readings
*Patient Care	<input checked="" type="radio"/> Yes <input type="radio"/> No
Subject	
*Subject	--Select Here--
*Specialty	--Select Here--
*Name of Readings	--Select Here--
*Topic / Title	
Publisher	
*Publication Year	
Volume / Issue No	
Page number	
Additional Remarks	

[Proceed](#)

To proceed to the next stage of the application (i.e.: Documents)

- Select **Patient Care Subject**
- Select **Subject**
- Select **Specialty**
- Select **Name of Readings**
- Enter **Topic / Title**
- Optional: Enter **Publisher**
- Enter **Publication Year (yyyy)**
- Optional: Enter **Serial / Volume No.**
- Optional: Enter **Page number**
- Optional: Enter **Additional Remarks**
- Click on the [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 140

The screenshot displays a web form titled "Submission of CPE Claims". At the top, there is a navigation bar with tabs: "Category", "Claim", "Documents" (which is active), "Confirmation", and "Acknowledgement". Below the navigation bar, the form is divided into two main sections: "Mandatory Documents" and "Additional Documents".

Mandatory Documents: This section contains a "Document Title" field with the text "*Upload Document" below it. To the right, there is a "Copy of Article" label above a text input field. Further right are two buttons: "Browse.." and "Attach".

Additional Documents: This section contains a "Document Title" field with a dropdown menu showing "--Select Here--". Below it is a "File" label above a text input field. To the right of the file input are two buttons: "Browse.." and "Attach".

Below these sections is a "Documents Attached" section, which currently displays the text "No document attached.". At the bottom of the form is a "Proceed" button.

- Upload Mandatory Documents
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Optional: Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the file to upload.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 141

Category Claim Documents **Confirmation** Acknowledgement

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Readings Credit Claim

Category	3A
Type of Activity	Readings
Patient Care Subject	No
Subject	Good Distribution Practices
Specialty	Oncology Pharmacy
Name of Readings	American Journal of Clinical Nutrition
Topic / Title	3A Readings 24 Jan
Publisher	-
Publication Year	2013
Volume / Issue No	-
Page number	-
Additional Remarks	-
CPE Points	1

Documents Attached

[Copy of Article](#)

Confirm

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the **[Confirm]** button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 142

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 3A has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-3A-3911
Type of Activity : Reading
Activity Date : 25/01/2013
Activity Title: American Journal of Clinical Nutrition-3A 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.9. Category 3A (Online/Offline Education Programmes)

Figure 143

Category

Claim

Documents

Confirmation

Acknowledgement

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09165J
Name	samuel tan
Registered Specialty	-
Appointment	Acting Director (02/03/2000)
CPE Specialty	-

Category of Online/Offline Education Programmes Credit Claim

Category	3A
Type of Activity	Online/Offline Education Programmes
*Patient Care Subject	<input checked="" type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
<input type="checkbox"/> Completed Self-assessment / Learning summary	
*CPE Points Awarded by Provider	
*Specialty	--Select Here--
*Programme Provider	--Select Here--
*Programme Title	
Author / Speaker	
URL	
Additional Remarks	<div>(0/500)</div>

Proceed

To proceed to the next stage of the application (i.e.: Documents)

- Select **patient Care Subject**
- Select **Subject**
- Enter **CPE Points Awarded by Provider**
- Select **Specialty**
- Enter **Programme Provider**
- Enter **Programme Title**
- Optional: Enter **Author/Speaker**
- Optional: Enter **URL**
- Optional: Enter **Additional Remarks**
- Click on the **Proceed** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 144

Category Claim **Documents** Confirmation Acknowledgement

Submission of CPE Claims

Mandatory Documents

Document Title	Certificate of completion
*Upload Document	<input type="text"/> Browse.. Attach
Document Title	Evidence of CPE points
*Upload Document	<input type="text"/> Browse.. Attach

Additional Documents

Document Title	--Select Here--
File	<input type="text"/> Browse.. Attach

Documents Attached

No document attached.

[Proceed](#)

- Upload Mandatory Documents
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Optional: Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 145

Category Claim Documents **Confirmation** Acknowledgement

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Online/Offline Education Programmes Credit Claim

Category	3A
Type of Activity	Online/Offline Education Programmes
Patient Care Subject	No
Subject	Good Distribution Practices
Completed Self-assessment / Learning summary	Yes
CPE Points Awarded by Provider	2
Specialty	Oncology Pharmacy
Programme Provider	A
Programme Title	3A Online/Offline Education Programmes 24 Jan
Author / Speaker	-
URL	-
Additional Remarks	-
CPE Points	2

Documents Attached

[Certificate of completion](#)

[Evidence of CPE points](#)

Confirm

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the **[Confirm]** button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 146

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 3A has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-3A-3912
Type of Activity : Online/Offline Education Programmes
Activity Date : 25/01/2013
Activity Title: A-3A Online/Offline Education Programmes 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.14.10. Category 3B (Post graduate Programmes)

Figure 147

Category Claim Documents Confirmation Acknowledgement

Submission of CPE Claims

Note: All Fields marked with asterisk (*) are mandatory.

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Post graduate Programmes Credit Claim

Category	3B
Type of Activity	Post graduate Programmes
*Patient Care Subject	<input type="radio"/> Yes <input type="radio"/> No
*Subject	--Select Here--
*Title	
*Specialty	--Select Here--
*Organiser	
*Country	--Select Here--
*Venue	
*Date From	dd/mm/yyyy
*Date To	dd/mm/yyyy
*Duration (hrs)	--Select Here--
Course Type	--Select Here--
Qualification Type	--Select Here--
Additional Remarks	

Proceed

To proceed to the next stage of the application (i.e.: Documents)

- Select **Patient Care Subject**
- Select **Subject**
- Enter the **Title**
- Select **Specialty**
- Enter the **Organiser**
- Select **Country**
- Select **Name of Venue**
- Enter **Date From (dd/mm/yyyy)**
- Enter **Date To (dd/mm/yyyy)**
- Select **Duration of Event**
- (Optional): Select **Course Type**
- (Optional): Select **Qualification Type**
- (Optional): Enter **Additional Remarks**
- Click on the **Proceed** button

If the inputs all pass the required validation checks, the Documents form will be displayed as follows.

Figure 148

Category Claim **Documents** Confirmation Acknowledgement

Submission of CPE Claims

Mandatory Documents

Document Title Proof of Study

*Upload Document [Browse..](#) [Attach](#)

Additional Documents

Document Title --Select Here--

File [Browse..](#) [Attach](#)

Documents Attached

No document attached.

[Proceed](#)

- Upload Mandatory Documents
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Optional: Upload Additional Documents
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the **file to upload**.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Tip: You may click on the [\[Claim\]](#) link to return to the previous page to make changes, if necessary.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 149

The screenshot displays the 'Submission of CPE Claims' page. At the top, there is a navigation bar with tabs: 'Category', 'Claim', 'Documents', 'Confirmation' (highlighted), and 'Acknowledgement'. Below the navigation bar, the title 'Submission of CPE Claims' is shown. The page is divided into two main sections: 'Registration Details' and 'Category of Post graduate Programmes Credit Claim'. The 'Registration Details' section contains a table with the following information:

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

The 'Category of Post graduate Programmes Credit Claim' section contains a table with the following information:

Category	3B
Type of Activity	Post graduate Programmes
Patient Care Subject	Yes
Subject	Pharmacology and Pharmacotherapy
Title	3B Post graduate Programmes 24 Jan
Specialty	Oncology Pharmacy
Organiser	A
Country	Singapore
Venue	A
Date From	11/01/2013
Date To	11/01/2013
Duration	12 months
Course Type	Full Time
Qualification Type	-
Additional Remarks	-
CPE Points	12

Below the category table, there is a section titled 'Documents Attached' with a link to 'Proof of Study'. At the bottom of the page, there is a 'Confirm' button.

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Click on the **[Confirm]** button

The CPE Claims acknowledgement page will be displayed as follows.

Figure 150

Category > Claims > Documents > Confirmation > Acknowledgement

Submission of CPE Claims

Please be informed that your submission of CPE claim for Category 3B has been submitted to Singapore Pharmacy Council on 25/01/2013. Please print/save a copy of this acknowledgement for your reference.

Your application no. is SPC20130125-3B-3913
Type of Activity : Post graduate Programmes
Activity Date : 25/01/2013
Activity Title: 3B Post graduate Programmes 24 Jan

You will be notified via email on the outcome of your application. Please login to view status of your claims For any query, please email to enquiries@spc.gov.sg and quote the above application no.

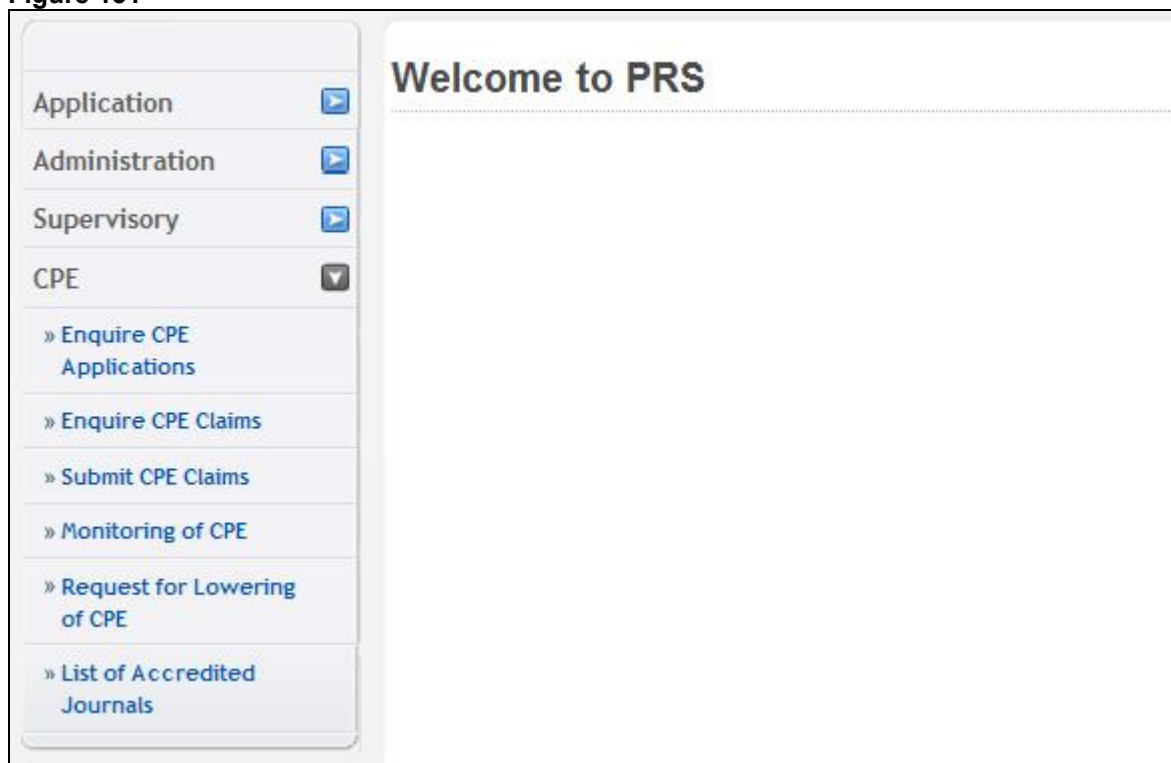
Print

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.15. Enquire CPE Claims

Figure 151



The menu on the left displays the functions you have access to. To enquire a CPE Claim, click on the **[CPE]** menu item. Click on the **[Enquire CPE Claims]** link

The Search Tools Page will be displayed

Figure 152

The image shows a web form titled 'Enquire Applications'. At the top, there are two buttons: 'Enquire Applications' (highlighted in blue) and 'View Details'. Below this is a section titled 'SEARCH'. The search form consists of several rows of input fields. The first row is 'Application No' with a text input box. The second row has 'Submission Date From' and 'Submission Date To', each with a text input box containing 'dd/mm/yyyy' and a small calendar icon to the right. The third row has 'Activity Date From' and 'Activity Date To', each with a text input box containing 'dd/mm/yyyy' and a small calendar icon to the right. The fourth row is 'Application Status' with a dropdown menu showing '--Select Here--'. The fifth row is 'Category' with a dropdown menu showing '--Select Here--'. The sixth row is 'Type of Activity' with a dropdown menu showing '--Select Here--'. At the bottom left of the form is a blue 'Search' button.

This allows can search for the application that they want to enquire.

- Enter **Application No**
- Enter **Submission Date From** and **Submission Date No**
- Enter **Activity Date from** and **Activity Date To**
- Select **Application Status**

- Select the **Category**
- Select the **Type of Activity**

The Enquire CPE Claims page will be displayed as follows.

Figure 153

Claims						
Application No.	Type of Activity	Activity Title	Activity Date	Status	Remarks	Status Date ▲
SPC20130308-3A-0045	Readings	American Journal of Cardiology - Drugs and Therapies	-	Draft	-	08/03/2013
SPC20130308-1C-0049	Overseas Events	Geriatrics	08/03/2013 - 08/03/2013	Application Submitted	-	08/03/2013
SPC20130308-2B-0015	Oral Presentation	Pharmacotherapy-Cardiology	08/03/2013	Application Submitted	-	08/03/2013
SPC20130308-2A-0003	Journals	Hospital Pharmacist - Hospital Pharmacist	08/03/2013	Application Submitted	-	08/03/2013
SPC20130308-2B-0014	Oral Presentation	Good Distribution Practices- Geriatrics	08/03/2013	Application Submitted	-	08/03/2013
SPC20130308-3B-0017	Post graduate Programmes	Customer Service	08/03/2013	Application Submitted	-	08/03/2013
SPC20130308-3A-0044	Readings	Acute Pain (International Journal of Acute Pain Management) - Acute Pain (International Journal of Acute Pain Management)	08/03/2013	Approve	-	08/03/2013
SPC20130308-2A-0002	Journals	Clinical Pharmacokinetics - Clinical Pharmacokinetics	08/03/2013	Application Submitted	-	08/03/2013
SPC20130308-1A-0055	Grand Ward Rounds	Good Clinical Practice	08/03/2013	Approve	-	08/03/2013
SPC20130308-1C-0048	Overseas Events	Pharmacy Law and Ethics	08/03/2013 - 08/03/2013	Application Submitted	-	08/03/2013

Page 1 2 3 [First] | [Previous] | [Next] | [Last]

To view on a particular CPE Claim, click on the application no.

The CPE Claim will be displayed as follows.

Figure 154

[Enquire Applications](#) [View Details](#)

Submission of CPE Claims

Registration Details

Registration No.	P09051D
Name	Nicholas Lim
Registered Specialty	-
Appointment	Associate Clinical Research Manager (11/11/1993)
CPE Specialty	-

Category of Post graduate Programmes Credit Claim

Category	3B
Type of Activity	Post graduate Programmes
Patient Care Subject	Yes
Subject	Pharmacology and Pharmacotherapy
Title	3B Post graduate Programmes 24 Jan
Specialty	Oncology Pharmacy
Organiser	A
Country	Singapore
Venue	A
Date From	11/01/2013
Date To	11/01/2013
Duration	12 months
Course Type	Full Time
Qualification Type	-
Additional Remarks	-
CPE Points	12

Documents Attached

[Proof of Study](#)

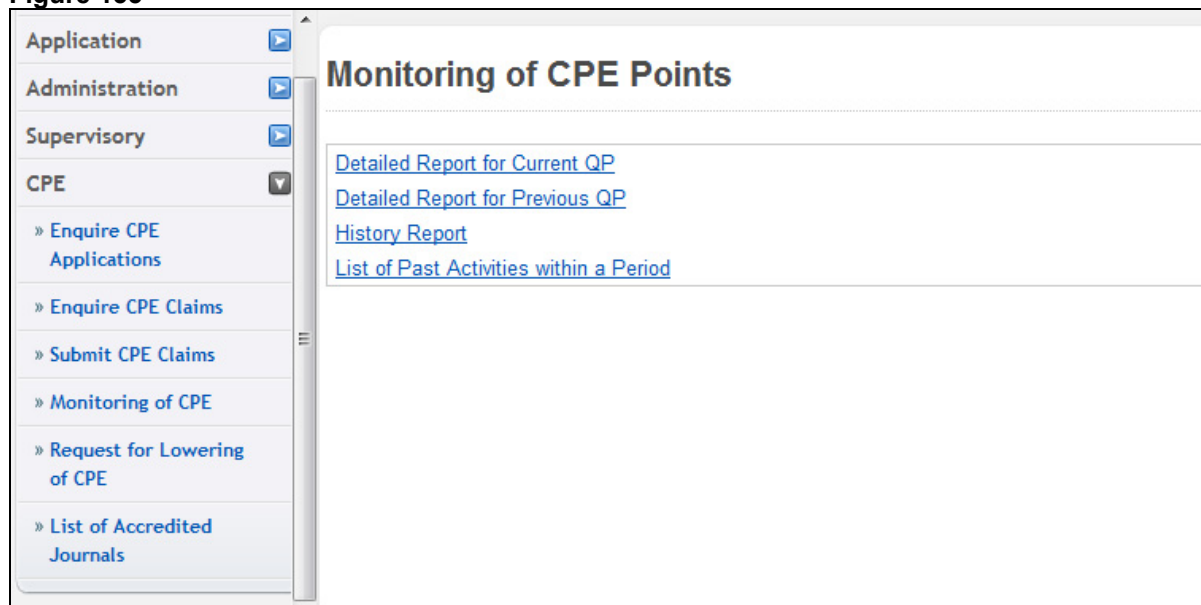
[Print](#)

- Tip: You may click on the [\[Enquire Application\]](#) link to return to the previous page to make changes, if necessary.
- Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.16. Monitoring of CPE

The menu on the left displays the functions you have access to. To monitor CPE, click on the [\[CPE\]](#) menu item. Click on the [\[Monitoring of CPE\]](#) link.

Figure 155



2.16.1. Detailed Report for Current/Previous QP

Click on the different links displayed on the right to view the different reports.
The reports will be displayed as follows.

Figure 156

Detailed Report for Current QP

Registration No.	P09165J
Name	samuel tan
Registered Specialty	-
Appointment	Acting Director (02/03/2000)
CPE Specialty	-

All the figures displayed are correct as of 11/03/2013 09:13.

Summary

Qualifying Period (QP)		
QP Type	Time Frame	Note
QP	01/09/2012 - 31/08/2014	-

Points within QP				
Point Type	Min. Requirement	*Awarded Points	Meet Min. Requirement?	Shortfall
Total CPE Points	50	11	No	39
Patient Care Points	50	1	No	49

*All the awarded points displayed above are after cap points (i.e. Points after applying day cap, event cap and category cap, if any).
Notes: Total CPE Points = Patient Care Points + Non-Patient Care Points

Breakdown of CPE Points by Category

Category	Before Capping				After Capping			
	Patient Care Points	Specialty Points	Non-Patient Care Points	Total Awarded Points	Patient Care Points	Specialty Points	Non-Patient Care Points	Total Awarded Points
1A	1	0	6	7	1	0	6	7
1B	0	0	0	0	0	0	0	0
1C	0	0	0	0	0	0	0	0
2A	0	0	0	0	0	0	0	0
2B	0	0	0	0	0	0	0	0
3A	0	0	4	4	0	0	4	4
3B	0	0	0	0	0	0	0	0

#denotes capped points

[Click here for Capping Rules](#)

Approved Activities

S/N	Date	Category	Activities Information	Patient Care Points	Specialty Points	Non-Patient Care Points	Total Points
1	08/03/2013	3A	SPC20130308-3A-0043 Pharmaceutical Journal Online CPD-q	0	0	2	2
2	11/01/2013	1A	SPC20130308-1A-0051 1A Grand Ward Rounds 24 Jan	1	0	0	1
3	11/01/2013	1A	SPC20130308-1A-0052 u	0	0	1	1
4	08/03/2013	1A	SPC20130308-1A-0055 Good Clinical Practice	0	0	1	1
5	08/03/2013	3A	SPC20130308-3A-0042 American Association of Critical Care Nurses AACN Advanced Critical Care - s	0	0	1	1
6	08/03/2013	3A	SPC20130308-3A-0044 Acute Pain (International Journal of Acute Pain Management) - Acute Pain (International Journal of Acute Pain Management)	0	0	1	1
7	08/03/2013	1A	SPC20130308-1A-0054 Advance pharmacotherapy-Cardiology	0	0	1	1
8	08/03/2013	1A	SPC20130308-1A-0053 i	0	0	3	3

#denotes capped points

[Rate this service](#)

- To view the Capping rules, click on the [\[Click here for Capping Rules\]](#) link.
- To rate the service provided; click on the [\[Rate this service\]](#) link.
- To print the page displayed, click on the [\[Print\]](#) button.
- To view the pending and rejected activities, click on the [\[View Pending and Rejected Activities\]](#) button.
- To send an enquiry for CPE, click on the [\[Send CPE Enquiry\]](#) button.

2.16.1.1. Pending and Rejected Activities

The pending and rejected activities screen will be displayed as follows.

Figure 157

Pending and Rejected Activities							
Pending Activities							
S/N	Date	Category	Activities Information	Patient Care Points	Specialty Points	Non-Patient Care Points	Total Points
1	18/12/2012	1A	SPC20121218-1A-2889 ty	24	0	0	24
#denotes capped points							
Rejected Activities							
S/N	Date	Category	Activities Information	Patient Care Points	Specialty Points	Non-Patient Care Points	Total Points
1	18/12/2012	1C	SPC20121218-1C-2890 r	0	0	14	14
#denotes capped points							
<input type="button" value="Print"/> <input type="button" value="Close"/>							

- To print the page displayed, click on the [\[Print\]](#) button.
- To close this page, click on the [\[Close\]](#) button.

2.16.1.2. Send CPE Enquiry

Figure 158

Send CPE Enquiry

*Enquiry Type

Activity ID

*Sender Email

(0/500)

To send a CPE Enquiry,

- Select **Enquiry Type**
- Enter **Activity ID**
- Enter **Sender Email**
- Enter **Remarks**
- Click on the [\[Send\]](#) button to proceed.
- Click on the [\[Close\]](#) button to close this page

2.16.2. History Report

Figure 159

History Report

Registration No. P05002D
Name Testing
Registered Specialty -
Appointment Associate Professor (01/01/2001)
CPE Specialty -

All the figures displayed are correct as of null.

QP	Category							Min. Requirement			*Awarded Points		
	1A	1B	1C	2A	2B	3A	3B	Patient Care Points	Specialty Points	Total CPE Points	Patient Care Points	Specialty Points	Total CPE Points
03/10/2013-31/08/2014	2	1	2	0	0	1	0	15	0	22	2	0	6

* All the awarded points displayed above are after cap points(i.e. Points after applying day cap, event cap and category cap, if any).

[Rate this service](#)

- To view the QP, click on hyperlink period of date.
- To rate the service provided; click on the [\[Rate this service\]](#) link.
- To print the page displayed, click on the [\[Print\]](#) button.

2.16.3. List of Past Activities within a Period

Figure 160

List of Past Activities within a Period

Note: All Fields marked with asterisk (*) are mandatory.

*Period From

*To

Category
--Select Here--

Type of Activity
--Select Here--

Activity Title

QP
--Select Here--

Generate

Approved Activities

S/N	QP	Date	Category	Activities Information	Patient Care Points	Specialty Points	Non-Patient Care Points	Total Points

#denotes capped points

*Patient Care Points

-

*Specialty Points

-

*Non-Patient Care Points

-

*Total CPE Points

-

[Rate this service](#)

Print

To generate a list of Past Activities within a Period:

- Enter **Period From**.(dd/mm/yy)
- Enter **Period To** (dd/mm/yy)
- (Optional): Select **Category**.
- (Optional): Select **Type of Activity**
- (Optional): Enter **Activity Title**
- (Optional): Select **QP**
- Click on the **[Generate]** button.

A list of Approved Activities will be displayed as follows.

Figure 161

List of Past Activities within a Period

Note: All Fields marked with asterisk (*) are mandatory.

*Period From

01/01/2012

*To

31/12/2013

Category

--Select Here--

Type of Activity

--Select Here--

Activity Title

QP

--Select Here--

Generate

Approved Activities

S/N	QP	Date	Category	Activities Information	Patient Care Points	Specialty Points	Non-Patient Care Points	Total Points
1	01/09/2012 - 31/08/2014	11/01/2013	1A	SPC20130308-1A-0051 1A Grand Ward Rounds 24 Jan	1	0	0	1

#denotes capped points

*Patient Care Points

1

*Specialty Points

0

*Non-Patient Care Points

0

*Total CPE Points

1

*All the awarded points displayed above are after applying day cap and event cap ONLY (if any).

[Rate this service](#)

Print

- To view the details of the activity, click on the activity code that is in hyperlink.

The activity details will be displayed as follows.

Figure 162

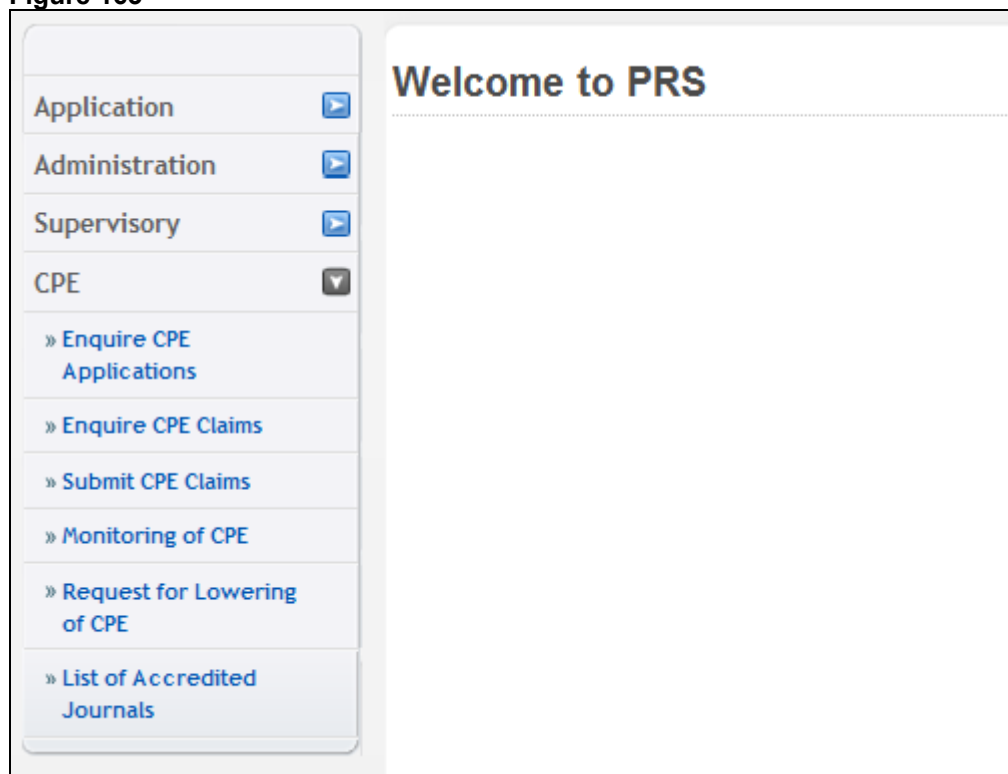
Activity Details	
Registration No.	P09165J
Name	samuel tan
Registered Specialty	-
Appointment	Acting Director (02/03/2000)
CPE Specialty	-
Claim ID	SPC20130308-1A-0051
Activity Title	1A Grand Ward Rounds 24 Jan
Activity Date	11/01/2013
Submission Date	08/03/2013
Approval Date	08/03/2013
Category	1A
Type of Activity	Grand Ward Rounds
Role	Participant
Patient Care Subject	Yes
Subject	-
Event Title	1A Grand Ward Rounds 24 Jan
Specialty	Oncology Pharmacy
Venue	A
Event Date	11/01/2013
Event Duration	-
Additional Remarks	-
QP	01/09/2012 - 31/08/2014
Point Type	*Awarded Points
Patient Care Points	1

[Print](#) [Close](#)

- To print the page displayed, click on the [\[Print\]](#) button.
- To close the page, click on the [\[Close\]](#) button.

2.17. Request for Lowering of CPE Application

Figure 163



The menu on the left displays the functions you have access to. To submit a Request of Lowering of CPE, click on the **[CPE]** menu item. Click on the **[Request for Lowering of CPE]** link

The Request of Lowering of CPE form will be displayed as follows.

Figure 164

Application
Confirmation
Acknowledgement

Application for Request for Lowering of CPE

Note: All Fields marked with asterisk (*) are mandatory.

Registration No.	P09165J
Name	samuel tan
Registered Specialty	-
Appointment	Acting Director (02/03/2000)
CPE Specialty	-

*Reason
--Select Here--

*Start Date
dd/mm/yyyy

End Date

Remarks
(0/500)

SUPPORTING DOCUMENTS

Note:

- File must be in JPEG(.jpg or .jpeg), PDF (.pdf).
- Each file size must not exceed 1MB

Mandatory Documents

Document Title	Declaration		Browse..	Attach
*Upload Document				

Document Title	--Select Here--		Browse..	Attach
File				

Documents Attached
No document attached.

☐ I declare that the above information is true and accurate. I undertake that in the event that I should resume active practice anytime in the future, I will inform the Singapore Pharmacy Council immediately and fulfill the requisite CPE points.

Proceed

To proceed to the next stage of the application (i.e.: Confirmation)

- Enter the **Reason**
- (Optional): Enter the **Reason**(Others)
- Enter **Start Date (dd/mm/yy)**
- (Optional): Enter **End Date (dd/mm/yy)**
- (Optional): Enter **Remarks**
- Upload **Mandatory Documents** (Inactive Declaration Form)
 - Click on the **[Browse]** button.
 - Select the **file to upload**.

- Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- (Optional): Upload **Additional Documents**
 - Select the **document title**.
 - If others, enter the **document title**
 - Click on the [\[Browse\]](#) button.
 - Select the file to upload.
 - Click on the [\[Open\]](#) button.
 - Click on the [\[Attach\]](#) button.
- Click [\[Proceed\]](#) button

If the inputs all pass the required validation checks, the confirmation page will be displayed as follows.

Figure 165

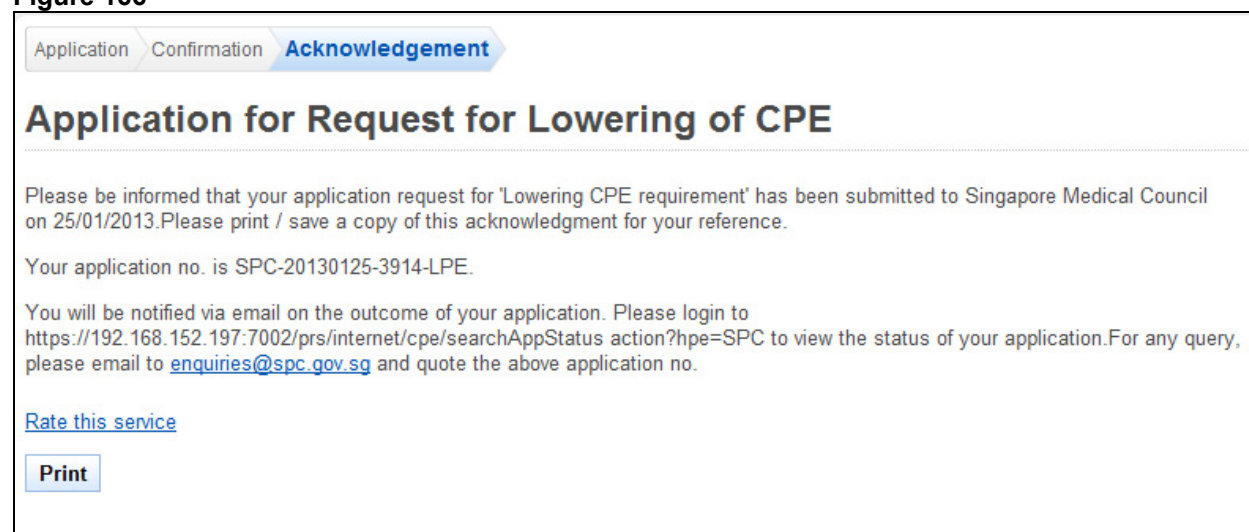
Application	Confirmation	Acknowledgement
<h2>Application for Request for Lowering of CPE</h2>		
<p>Note: All Fields marked with asterisk (*) are mandatory.</p>		
Registration No.	P09165J	
Name	samuel tan	
Registered Specialty	-	
Appointment	Acting Director (02/03/2000)	
CPE Specialty	-	
Reason	Residing overseas for at least a year	
Start Date	13/03/2013	
End Date	-	
Remarks	-	
<h3>SUPPORTING DOCUMENTS</h3>		
Documents Attached		
Declaration		
Document Title 2		
<input type="button" value="Confirm"/>		

To proceed to the next stage of the application (i.e.: Acknowledgement)

- Tip: You may click on the [\[Application\]](#) link to return to the previous page to make changes, if necessary.
- Click on the [\[Confirm\]](#) button

The Request for Lowering of CPE acknowledgement page will be displayed as follows.

Figure 166



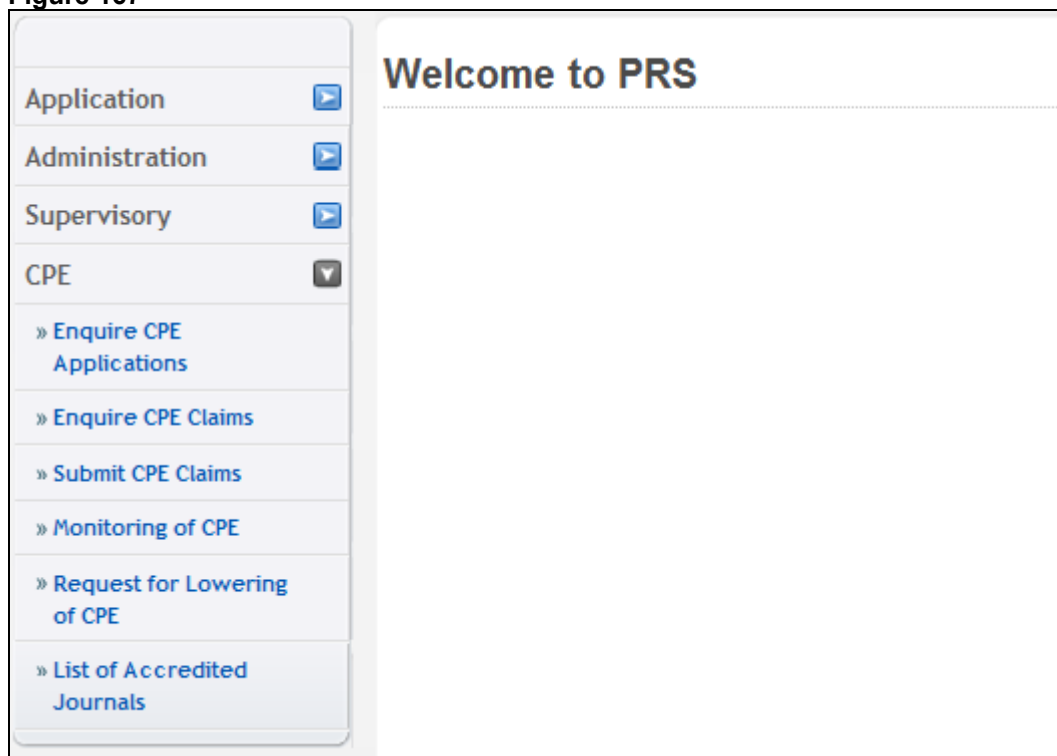
The screenshot shows a web interface with three tabs: 'Application', 'Confirmation', and 'Acknowledgement'. The 'Acknowledgement' tab is active. Below the tabs, the title 'Application for Request for Lowering of CPE' is displayed. The main content area contains the following text: 'Please be informed that your application request for 'Lowering CPE requirement' has been submitted to Singapore Medical Council on 25/01/2013. Please print / save a copy of this acknowledgment for your reference.' This is followed by 'Your application no. is SPC-20130125-3914-LPE.' and 'You will be notified via email on the outcome of your application. Please login to https://192.168.152.197:7002/prs/internet/cpe/searchAppStatus action?hpe=SPC to view the status of your application. For any query, please email to enquiries@spc.gov.sg and quote the above application no.' There is a link 'Rate this service' and a 'Print' button at the bottom left of the content area.

To finish with the application

- Optional: Click on the [\[email\]](#) link to email SPC for any queries
- Recommended: Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.

2.18. Enquire Lowering of CPE Application

Figure 167



The menu on the left displays the functions you have access to. To enquire a CPE Application, click on the **[CPE]** menu item to expand. Click on the **[Enquire CPE Applications]** link

The Enquire CPE Application page will be displayed as follows

Figure 168

Enquire Applications View Details				
Application Submitted				
Application No.	Application Type	Date of Submission	Application Status	Remarks
SPC-20121115-1841-LPE	Application for Request for Lowering of PE	15/11/2012	Application Submitted	-
SPC-20120803-4475-LPE	Application for Request for Lowering of PE	03/08/2012	Pending Processing	-
SPC-20120801-4404-LPE	Application for Request for Lowering of PE	01/08/2012	Pending Processing	-
Page 1		[First] [Previous] [Next] [Last]		

To view on a particular CPE Application, click on the application no.

The CPE Application will be displayed as follows

Figure 169

The screenshot shows a web application interface for requesting a lowering of CPE. At the top, there are two buttons: 'Enquire Applications' and 'View Details'. Below these is the title 'Application for Request for Lowering of CPE'. The form is divided into several sections. The first section contains personal and professional details: Registration No. (P05002D), Name (Testing), Registered Specialty (-), Appointment (Associate Professor (01/01/2001)), and CPE Specialty (-). The second section contains details about the request: Reason (Residing overseas for at least a year), Start Date (11/01/2013), End Date (-), and Remarks (-). The third section is 'Documents Attached', which shows 'No document attached.'. At the bottom, there is a link 'Rate this service' and a 'Print' button.

Registration No.	P05002D
Name	Testing
Registered Specialty	-
Appointment	Associate Professor (01/01/2001)
CPE Specialty	-

Reason	Residing overseas for at least a year
Start Date	11/01/2013
End Date	-
Remarks	-

Documents Attached

No document attached.

[Rate this service](#)

[Print](#)

- Tip: You may click on the [\[Enquire Application\]](#) link to return to the previous page to make changes, if necessary.
- Click on the [\[Rate this service\]](#) hyperlink to rate the service.
- Click on the [\[Print\]](#) button to print out a copy of the acknowledgement page.