

1. All pre-pharmacy requirements **MUST BE** completed, in progress or planned before your application for admission will be reviewed. You have through the summer prior to entrance to complete your requirements.
2. If you have questions about whether certain courses fulfill the requirements, please refer to the Pre-pharmacy Articulation Agreements at: [www.pacific.edu/pharmd](http://www.pacific.edu/pharmd)
3. You must notify the Office of Admission, in writing, of any course changes, additions or deletions you make after submitting your PharmCAS and Supplemental Applications.
4. If your pre-requisites were completed at a school for which there is no agreement, see instructions on checklist.

Do you have a Pharmacy Technician license?  Yes  No (If yes, please include a copy.)

Have you received or do you anticipate a Bachelor's degree prior to entering our program?  Yes \_\_\_\_\_  No \_\_\_\_\_  
(major/year)

### COURSES IN PROGRESS OR PLANNED

Courses in Progress for the \_\_\_\_\_ semester/quarter at \_\_\_\_\_.  
(college/university)

Title & Department	Course #	Units
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Courses Planned for the \_\_\_\_\_ semester/quarter at \_\_\_\_\_.  
(college/university)

Title & Department	Course #	Units
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Courses Planned for the \_\_\_\_\_ semester/quarter at \_\_\_\_\_.  
(college/university)

Title & Department	Course #	Units
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please use the following form to update the admission office of any changes you have made to your schedule and send to:

Office of Admission  
 University of the Pacific  
 3601 Pacific Avenue  
 Stockton, CA 95211