

## Acknowledgement of Residency Program Policies and Requirements for residency programs starting July 2026

The following information is available on the UB SPPS website (https://pharmacy.buffalo.edu/academics/postgraduate-education/residency-training/applicationinformation.html) and a direct link to this information has been provided to you. We request that you take the time to review this information prior to accepting an interview with one of our programs in either Phase 1 or Phase 2 of the Match. An interview date cannot be confirmed until this form has been completed and signed. Please select the UB SPPS program(s) to which you have applied for the 2026-2027 residency year: ☐ PGY1 Pharmacy at Buffalo Psychiatric Center (stipend and benefits provided directly by site) ☐ PGY1 Community-Based Pharmacy Residency at Middleport Family Health Pharmacy (stipend and benefits provided directly by site) Please select the documents you have reviewed: ☐ UB SPPS PGY1 Resident Handbook, which includes: requirements for successful completion of the residency program, licensure, liability insurance and special training, policies on recruitment, paid time off, dismissal from program, leave and travel, and stipend and benefit information (all PGY1 candidates must review) Policies pertaining to Buffalo Psychiatric Center (emailed to you, not on website) Policies pertaining to Middleport Family Health Pharmacy (emailed to you, not on website) By signing, I acknowledge that I have received and reviewed the information indicated above regarding the requirements and policies of the UB School of Pharmacy and Pharmaceutical Sciences Residency Training Program(s) to which I have applied. Candidate Name – Signed Date

Candidate Name - Printed