



# **Application for a Dispensing Approval – Medicinal Cannabis - Pharmacist**

**PLEASE INDICATE (Tick)**

- NEW APPLICATION**
- APPLICATION FOR RENEWAL OF AN EXISTING APPROVAL**
- APPLICATION FOR AMENDMENT OF AN EXISTING APPROVAL**
- APPLICATION FOR REPLACEMENT OF AN EXISTING APPROVAL**

This form is to be used to apply for an approval (section 18 of the *Public Health (Medicinal Cannabis) Act 2016* (Qld)), or seek a renewal of an approval (section 48 of the *Public Health (Medicinal Cannabis) Act 2016*), to dispense medicinal cannabis, or seek an amendment of an approval (section 44 of the *Public Health (Medicinal Cannabis) Act 2016*), or seek a replacement of an approval (section 46 of the *Public Health (Medicinal Cannabis) Act 2016*).

*\* Renewal Application: Ensure that your renewal application is submitted **two (2) months prior to the expiry date** indicated on the original application.*

Your application **WILL NOT** be considered, or may be returned to you for completion, unless:

- ALL parts of this application form are completed accurately;
- ALL the relevant attachments are included; and
- the declaration is signed.

*Privacy Statement: The personal information and documents collected for the purpose of this application will be securely stored, and only accessible and used by authorised departmental persons for purposes in accordance with the Public Health (Medicinal Cannabis) Act 2016 and Public Health (Medicinal Cannabis) Regulation 2017.*

*Queensland Health may be required to make enquiries of, and exchange personal information with, other State, Territory or Commonwealth entities regarding any matters relevant to this application. The department will not disclose any personal information provided with this application and supporting documents to any other third parties without your consent unless required or authorised by law.*

*The Information Privacy Act 2009 (Qld) sets out the obligations for the collection and handling of personal information by Queensland Health. For information about how Queensland Health protects your personal information, or to learn about your right to access your own personal information, please see our website at [www.health.qld.gov.au](http://www.health.qld.gov.au).*

## **SECTION 1 - APPLICATION DETAILS**

**Amending an existing approval? Please provide details of the reason for the amendment: (please attach supporting documentation or rationale if required)**

**Renewing an existing approval? Please provide details of the reason for the amendment: (please attach supporting documentation or rationale if required)**

**Replacing an existing approval? Please provide details of the reason for the amendment: (please attach supporting documentation or rationale if required)**

## **SECTION 2 - PHARMACY DETAILS**

Pharmacy name

Primary contact person





## WHAT NOW?

*The Director-General, Queensland Health, (or delegate) will consider your application and, unless further information is required, will respond with a decision within:*

- 90 days for an original application for approval;
- 30 days for a renewal application;
- 60 days for another application for approval.

*The Director-General, Queensland Health, (or delegate) may refer your application to a specialist review committee to provide information to assist in their decision.*

*The Director-General, Queensland Health, (or delegate) may seek further information from you relevant to this application.*

## FURTHER INFORMATION

Applications must be forwarded by **POST, FAX** or **EMAIL** to:

Chief Executive  
Queensland Health  
Medicinal Cannabis Unit  
Locked Bag 21  
FORTITUDE VALLEY BC QLD 4006

t: (07) 3708 5283

f: (07) 3708 5431

e: [MCTeam@health.qld.gov.au](mailto:MCTeam@health.qld.gov.au)

w: [www.health.qld.gov.au/medicinal-cannabis](http://www.health.qld.gov.au/medicinal-cannabis)

The *Public Health (Medicinal Cannabis) Act 2016* and *Public Health (Medicinal Cannabis) Regulation 2017* may be found at this website: [www.legislation.qld.gov.au](http://www.legislation.qld.gov.au)