



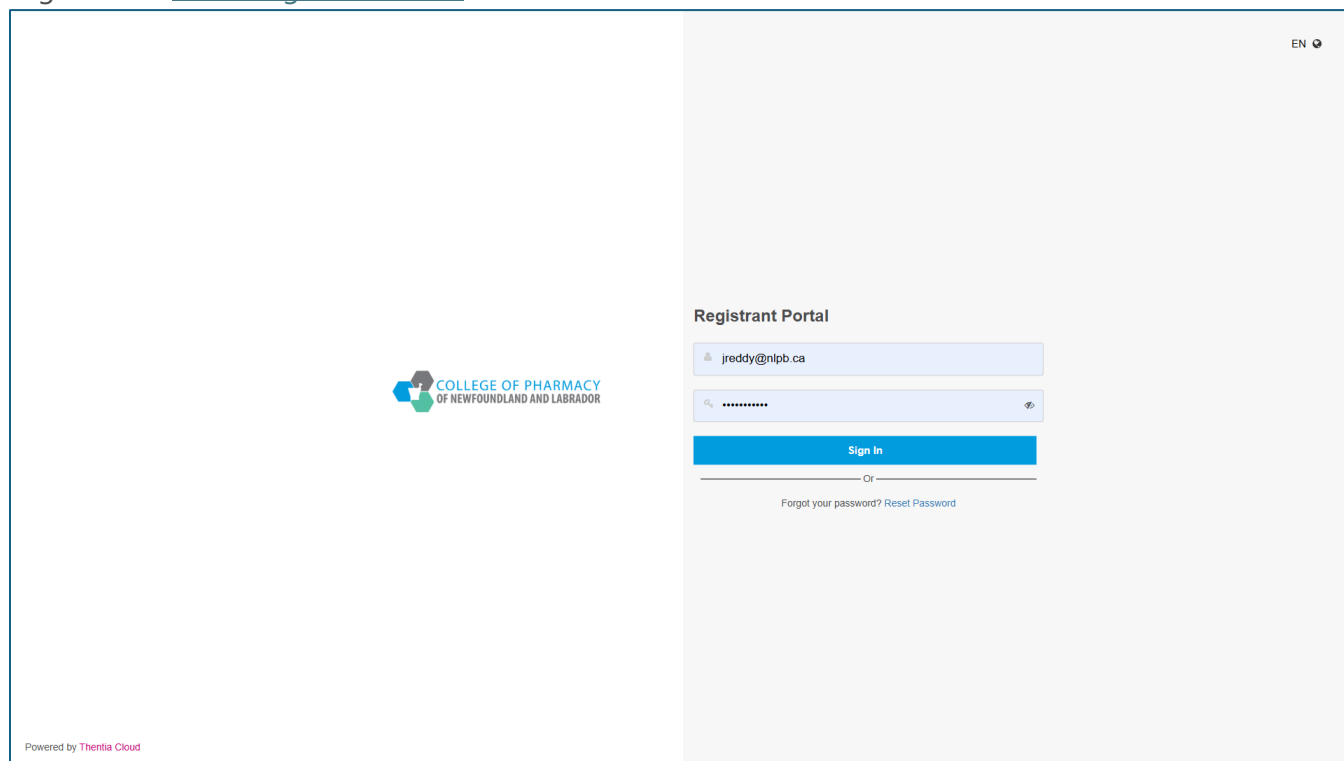
COLLEGE OF PHARMACY
OF NEWFOUNDLAND AND LABRADOR

REGISTRANT PORTAL USER GUIDE

Renewing your Registration

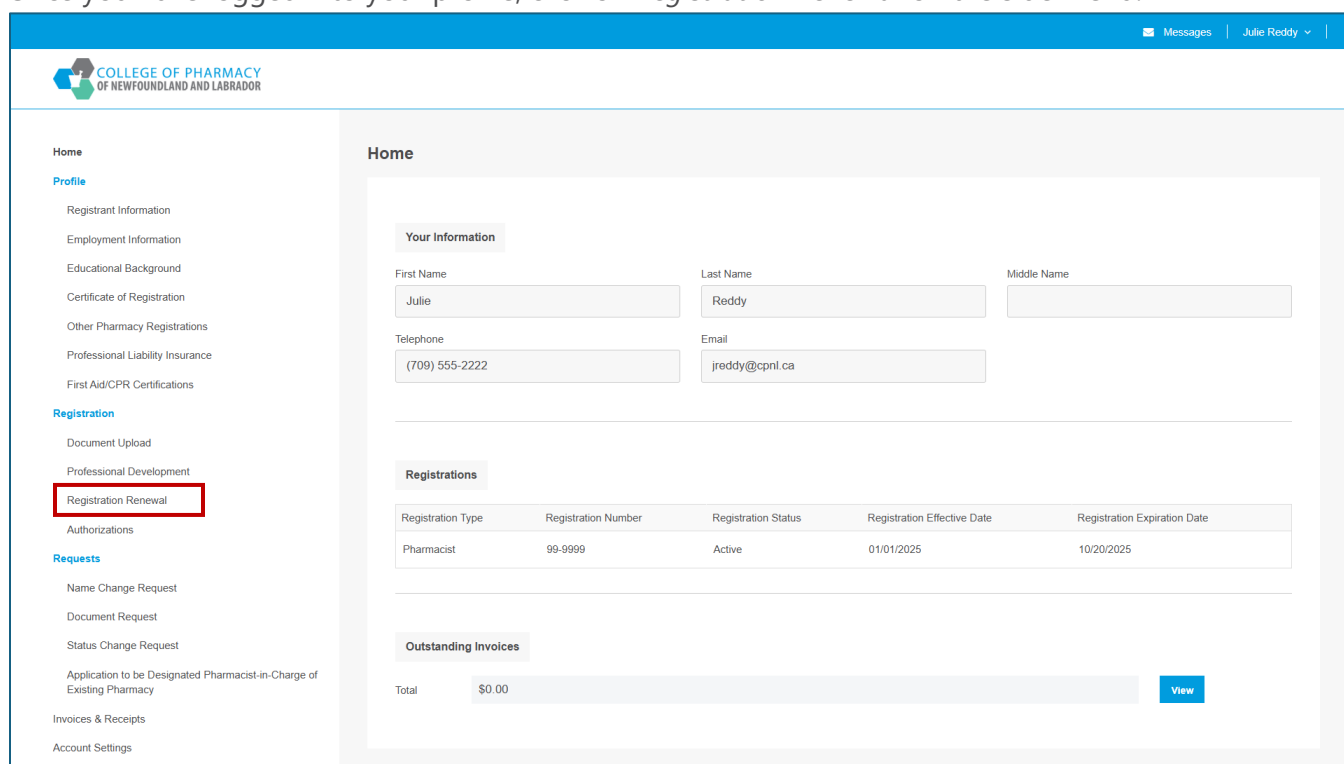
October 20, 2025

1. Log into the CPNL Registrant Portal.



The screenshot shows the login page for the CPNL Registrant Portal. On the left is the College of Pharmacy of Newfoundland and Labrador logo. On the right, under the heading "Registrant Portal", there are two input fields: one for email (containing "jreddy@nlpb.ca") and one for password (containing "*****"). Below these is a blue "Sign In" button. Underneath the button is a link that says "Forgot your password? Reset Password". At the bottom left, it says "Powered by Thentia Cloud". In the top right corner, there is a language selector showing "EN".

2. Once you have logged into your profile, click on *Registration Renewal* on the side menu.



The screenshot shows the home page of the CPNL Registrant Portal after a successful login. The top navigation bar includes "Messages" and the user's name "Julie Reddy". The left sidebar contains a menu with categories: "Home", "Profile", "Registration", "Requests", and "Invoices & Receipts". Under "Profile", there are links for Registrant Information, Employment Information, Educational Background, Certificate of Registration, Other Pharmacy Registrations, Professional Liability Insurance, and First Aid/CPR Certifications. Under "Registration", there are links for Document Upload, Professional Development, and "Registration Renewal" (which is highlighted with a red box). Under "Requests", there are links for Name Change Request, Document Request, Status Change Request, Application to be Designated Pharmacist-in-Charge of Existing Pharmacy, and Account Settings. The main content area is titled "Home" and contains three sections: "Your Information", "Registrations", and "Outstanding Invoices".

Your Information

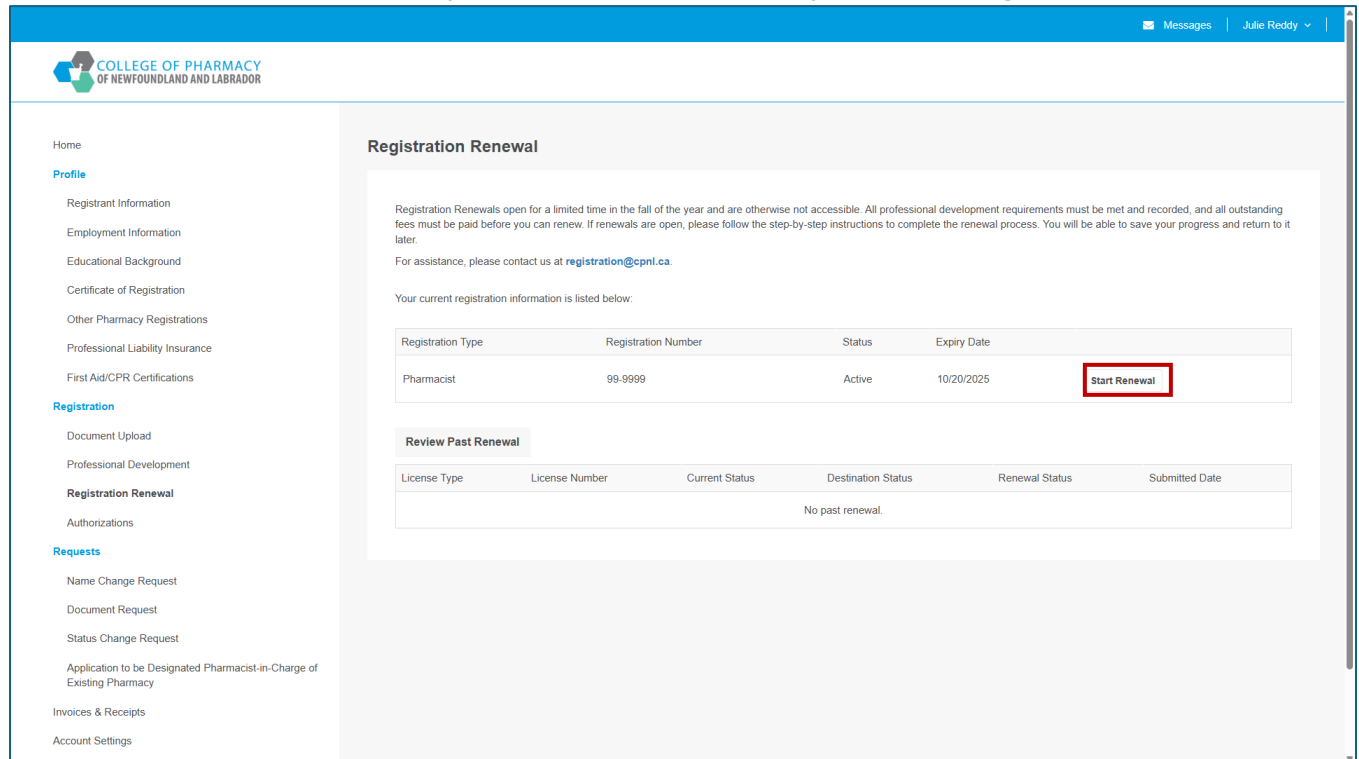
First Name	Last Name	Middle Name
Julie	Reddy	
Telephone	Email	
(709) 555-2222	jreddy@cpnl.ca	

Registrations

Registration Type	Registration Number	Registration Status	Registration Effective Date	Registration Expiration Date
Pharmacist	99-9999	Active	01/01/2025	10/20/2025

Outstanding Invoices

Total	\$0.00	View
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3. Click the *Start Renewal* button for your Pharmacist or Pharmacy Technician registration.

The screenshot displays the 'Registration Renewal' page of the College of Pharmacy of NL Registrant Portal. The page features a sidebar with navigation links and a main content area with a 'Start Renewal' button highlighted.

Navigation Links:

- Home
- Profile**
 - Registrant Information
 - Employment Information
 - Educational Background
 - Certificate of Registration
 - Other Pharmacy Registrations
 - Professional Liability Insurance
 - First Aid/CPR Certifications
- Registration**
 - Document Upload
 - Professional Development
- Registration Renewal**
- Requests**
 - Authorizations
 - Name Change Request
 - Document Request
 - Status Change Request
 - Application to be Designated Pharmacist-in-Charge of Existing Pharmacy
 - Invoices & Receipts
 - Account Settings

Registration Renewal Section:

Registration Renewals open for a limited time in the fall of the year and are otherwise not accessible. All professional development requirements must be met and recorded, and all outstanding fees must be paid before you can renew. If renewals are open, please follow the step-by-step instructions to complete the renewal process. You will be able to save your progress and return to it later.

For assistance, please contact us at registration@cpnl.ca.

Your current registration information is listed below:

Registration Type	Registration Number	Status	Expiry Date	
Pharmacist	99-9999	Active	10/20/2025	Start Renewal

Review Past Renewal

License Type	License Number	Current Status	Destination Status	Renewal Status	Submitted Date
No past renewal.					

4. Review and update your personal information as needed and click the *Save & Continue* button.

COLLEGE OF PHARMACY
OF NEWFOUNDLAND AND LABRADOR

Home

Profile

Registrant Information

Employment Information

Educational Background

Certificate of Registration

Other Pharmacy Registrations

Professional Liability Insurance

First Aid/CPR Certifications

Registration

Document Upload

Professional Development

Registration Renewal

Authorizations

Requests

Name Change Request

Document Request

Status Change Request

Application to be Designated Pharmacist-in-Charge of Existing Pharmacy

Invoices & Receipts

Account Settings

Registration Renewal

1 Registrant Information

Step 1 of 10

Note: All information with a red asterisk (*) is required.

Registrant Information

Last NameReddy

First NameJulie

Middle name

Birthdate12/06/1983

GenderFemale

Language Of CareEnglish

EthnicityWhite

Indigenous IdentityNot Applicable

Mailing Address

Street Address *1 Test Street

Street Address 2

City/Town *Testville

Province *Newfoundland and Labrador

Postal Code *A1A 1A1

Contact Information

Phone Number *(709) 555-2222

Other Phone Number

Primary E-mail *jreddy@cpnl.ca

Note: The email address entered here is for communication purposes only. The email used for login purposes can be changed under Account Settings.

Current Employment Details

Employment Status *Unemployed

Seeking Employment *Not seeking employment

Save & Continue >

5. Review and update your employment information as needed and click the *Save & Continue* button.

Note: Please ensure the *Employment End Date* field is completed for any employers for which you are no longer employed.

The screenshot displays the 'Registration Renewal' interface for the College of Pharmacy of Newfoundland and Labrador. The user is logged in as Julie Reddy. The interface is divided into a left sidebar with navigation links and a main content area. The main content area is titled 'Registration Renewal' and shows 'Step 2 of 10' for 'Employment Information'. A table lists employment history with columns for Employer Name, Other Employer Name, Primary Employment, Employment Start Date, and Employment End Date. A red box highlights the 'Update' button for the first entry. Below the table is a red-bordered button labeled '+ Add New Records'. At the bottom of the main content area, there are two buttons: '< Previous' and 'Save & Continue >', with the latter highlighted by a red box.

College of Pharmacy of Newfoundland and Labrador

Messages | Julie Reddy

Home

Profile

- Registrant Information
- Employment Information
- Educational Background
- Certificate of Registration
- Other Pharmacy Registrations
- Professional Liability Insurance
- First Aid/CPR Certifications

Registration

- Document Upload
- Professional Development

Registration Renewal

- Authorizations

Requests

- Name Change Request
- Document Request
- Status Change Request
- Application to be Designated Pharmacist-in-Charge of Existing Pharmacy

Invoices & Receipts

Account Settings

Registration Renewal

2 Employment Information Step 2 of 10

Your employment history (if any) is listed below. If you are applying for registration, please provide details regarding where you will be practicing in Newfoundland and Labrador (if known).

Employer Name	Other Employer Name	Primary Employment	Employment Start Date	Employment End Date
CPNL, 145 Kelsey Drive, St. John's		Yes	03/15/2021	

Update

+ Add New Records

< Previous Save & Continue >

6. Pharmacists are reminded to update the *CIHI Workforce Planning Information* section for each current employment record. Click the *Save & Continue* button to save your changes.

Home

Profile

Registrant Information

Employment Information

Educational Background

Certificate of Registration

Other Pharmacy Registrations

Professional Liability Insurance

First Aid/CPR Certifications

Registration

Document Upload

Professional Development

Registration Renewal

Authorizations

Requests

Name Change Request

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Status Change Request

Application to be Designated Pharmacist-in-Charge of Existing Pharmacy

Invoices & Receipts

Account Settings

Messages | Julie Reddy

COLLEGE OF PHARMACY
OF NEWFOUNDLAND AND LABRADOR

Employment Information - Add/Edit

Note: All information with a red asterisk (*) is required.

Employer Information

Employer Name *CPNL, 145 Kelsey Drive, St. John's

Employer Phone(709) 753-5877

Employer Emailinfox@cpnl.ca

Employment Start Date03/15/2021

Employment End DateMM/DD/YYYY

Is this your primary employment? *☒ Yes ☐ No

Employed through Staffing Agency? *☐ Yes ☒ No

Related to Profession *☐ Yes ☒ No

Do you provide direct patient care? *☐ Yes ☒ No

CIHI Workforce Planning Information (For pharmacists only)

Employment CategoryPermanent Employee

Employee TypeFull Time

Employee Type PreferenceBy Choice

PositionDirector/Assistant Director

Area of PracticeAdministration Regulation

Place of WorkRegulatory body

Do you work for this employer at multiple sites?☐ Yes ☒ No

Percentage of Virtual Care ProvidedNever

Mode of Direct Care ProvisionOther

Total Annual Hours2000

< Previous

Save & Continue >

7. Review and update your education information as needed and click the *Save & Continue* button.

Note: If you have recently graduated, please ensure the "I have not yet graduated" checkbox is unchecked.

The screenshot shows the 'Registration Renewal' page at Step 3 of 10, titled 'Educational Background'. The left sidebar contains navigation links: Home, Profile (active), Registrant Information, Employment Information, Educational Background, Certificate of Registration, Other Pharmacy Registrations, Professional Liability Insurance, First Aid/CPR Certifications, Registration, Document Upload, Professional Development, Registration Renewal, Authorizations, Requests, Name Change Request, Document Request, Status Change Request, Application to be Designated Pharmacist-in-Charge of Existing Pharmacy, Invoices & Receipts, and Account Settings. The main content area has a sub-header '3 Educational Background' and a progress indicator 'Step 3 of 10'. Below this is a text prompt: 'Please provide details of your initial pharmacy degree or pharmacy technician diploma and your highest level of education in pharmacy (if different). If you have not yet graduated, please provide details of the pharmacy or pharmacy technician program in which you are enrolled.' A table follows with columns: Education Institution, Education Level, and Program. The first row contains 'Memorial University of Newfoundland', 'PharmD', and 'Pharmacy'. An 'Update' button is to the right of the 'Pharmacy' cell. Below the table is a button '+ Add New Records'. At the bottom left is a '< Previous' button, and at the bottom right is a 'Save & Continue >' button.

Education Institution	Education Level	Program
Memorial University of Newfoundland	PharmD	Pharmacy

8. Select *Active* from the *Requested Status* dropdown menu and click the *Save & Continue* button.

The screenshot shows the 'Registration Renewal' page at Step 4 of 10, titled 'Status Change Request'. The left sidebar is identical to the previous screenshot. The main content area has a sub-header '4 Status Change Request' and a progress indicator 'Step 4 of 10'. Below this is a note: 'Note: All information with a red asterisk (*) is required.' There are three fields: 'License Type' with a dropdown menu showing 'Pharmacist', 'Application Status' with a dropdown menu showing 'Active', and 'Requested Status' with a dropdown menu showing 'Active'. The 'Requested Status' field is highlighted with a red box. At the bottom left is a '< Previous' button, and at the bottom right is a 'Save & Continue >' button.

9. Review the Professional Development Summary, ensuring you have 15 *Total CEUs Submitted* and 0 *Total Remaining CEUs Required* as well as at least 5 *Current CEUs* in the *Accredited Learning* Category, and click the *Save & Continue* button.

Note: To add or change professional development activities, click the Professional Development link to pause the renewal process and navigate to the Professional Development section of the portal. For instructions, please refer to the [CPNL Pharmacy Portal User Guide – Adding/Updating Professional Development Activities](#). To resume the renewal process, click the Continue button next to the appropriate registration on the Registration Renewal page.

The screenshot shows the 'Registration Renewal' page, Step 5 of 10: Professional Development Summary. The page includes a sidebar with navigation links and a main content area with several tables and buttons.

Registration Renewal
5 Professional Development Summary Step 5 of 10

Below is your Professional Development Summary for the most recent PD period.
To add or change a professional development activity, please visit the [Professional Development](#) page.

PD Period Status: Open

Registration Type	PD Period	Minimum CEUs Required	Total CEUs Submitted	Total Remaining CEUs Required
Pharmacist	11/30/2024 - 11/30/2025	15	15	0

CEUs By Category

Category	Minimum CEUs Required	Maximum CEUs	Current CEUs
Accredited Learning	5	N/A	5
Non-Accredited Learning	N/A	N/A	10

Learning Activities

PD Category	Activity Provider	Program Accredited By	Date of Completion	Number of CEUs / Hours of Learning
Accredited Learning	N/A	Canadian Council of Continuing Education (CCCEP)	10/06/2025	5
Non-Accredited Learning	N/A	Non-accredited	05/05/2025	10

< Previous Save & Continue >

10. Review and update your first aid and CPR certification as necessary and click the Save & Continue button.

Note: Proof of current first aid and CPR certification is only required for registered pharmacy professionals who are authorized to administer drug therapy by inhalation or injection.

The screenshot shows the 'Registration Renewal' page for 'First Aid/CPR Certifications' (Step 6 of 10). The left sidebar contains navigation links: Home, Profile, Registrant Information, Employment Information, Educational Background, Certificate of Registration, Other Pharmacy Registrations, Professional Liability Insurance, First Aid/CPR Certifications, Registration, Document Upload, Professional Development, Registration Renewal, Authorizations, Requests, Name Change Request, Document Request, Status Change Request, Application to be Designated Pharmacist-in-Charge of Existing Pharmacy, Invoices & Receipts, and Account Settings. The main content area has a header 'Registration Renewal' and a sub-header '6 First Aid/CPR Certifications'. Below this is a table with columns: Certifying Body, Certificate Type, Issue Date, and Expiration Date. The table contains one row: St John Ambulance, Emergency First Aid and CPR/AED (Level C), 09/14/2023, 12/31/2025. To the right of the row are 'Edit' and 'Delete' buttons. Below the table is a button '+ Add New Records'. At the bottom of the page are '< Previous' and 'Save & Continue >' buttons.

Certifying Body	Certificate Type	Issue Date	Expiration Date	
St John Ambulance	Emergency First Aid and CPR/AED (Level C)	09/14/2023	12/31/2025	Edit Delete

+ Add New Records

< Previous [Save & Continue >](#)

11. Update your professional liability insurance information by clicking the *Edit* button next to your last recorded policy or *Add New* to add a new policy. Click the *Save & Continue* button.

The screenshot shows the 'Registration Renewal' page for 'Professional Liability Insurance' (Step 7 of 10). The left sidebar is the same as in the previous screenshot. The main content area has a header 'Registration Renewal' and a sub-header '7 Professional Liability Insurance'. Below this is a table with columns: Provider Name, Policy Number, Occurrence Amount, Aggregate Amount, and Expiration Date. The table contains one row: ABC Insurance, ABC23875, 2000000, 4000000, 06/30/2026. To the right of the row is an 'Edit' button. Below the table is a button '+ Add New Records'. At the bottom of the page are '< Previous' and 'Save & Continue >' buttons.

Provider Name	Policy Number	Occurrence Amount	Aggregate Amount	Expiration Date	
ABC Insurance	ABC23875	2000000	4000000	06/30/2026	Edit

+ Add New Records

< Previous [Save & Continue >](#)

12. If updating or adding a policy, fill out or review and update the fields as necessary and click the *Choose File* button to upload a current copy of your professional liability insurance certificate (must be the policy certificate, not a receipt). Click the *Save & Continue* button to save your changes.

Note: For instructions, please refer to the [CPNL Pharmacy Portal User Guide – Adding/Updating Professional Liability Insurance](#).

The screenshot shows the 'Professional Liability Insurance' form. The left sidebar contains navigation links: Home, Profile (Registrant Information, Employment Information, Educational Background, Certificate of Registration, Other Pharmacy Registrations, Professional Liability Insurance, First Aid/CPR Certifications), Registration (Document Upload, Professional Development), Registration Renewal (Authorizations), Requests (Name Change Request, Document Request, Status Change Request, Application to be Designated Pharmacist-in-Charge of Existing Pharmacy), Invoices & Receipts, and Account Settings. The main form area has a header 'Professional Liability Insurance' and a note: 'All information with a red asterisk (*) is required.' Below this, there are input fields for 'Provider Name' (ABC Insurance), 'Policy Number' (ABC23875), 'Occurrence Amount' (2000000), 'Aggregate Amount' (4000000), and 'Expiration Date' (06/30/2026). A 'Certificate of PLI' field has a 'Choose File' button highlighted with a red box, and a file named 'certificate_policy.jpg' is shown below it. At the bottom right, a 'Save & Continue' button is highlighted with a red box. A '< Previous' button is at the bottom left.

13. Read and select *Yes* or *No* in answer to the declarations and click the *Save & Continue* button. Please note, an answer of *Yes* may require additional information and document uploads.

The screenshot shows the 'Registration Renewal' form, specifically the 'Declarations' section. The left sidebar is the same as in the previous screenshot. The main form area has a header 'Registration Renewal' and a sub-header '8 Declarations'. A note states: 'All information with a red asterisk (*) is required.' Below this, there are four questions with radio button options for 'Yes' or 'No':
1. Have you ever been found guilty or convicted of an offence under any provincial or federal statute in Canada or another country? *
2. Are you the subject of a current proceeding relating to an offence under any provincial or federal statute in Canada or another country? *
3. Has your registration ever been restricted, suspended, or revoked in a Canadian or other jurisdiction? *
4. Is your registration currently restricted, suspended, or revoked in a Canadian or other jurisdiction? *
At the bottom right, a 'Save & Continue' button is highlighted with a red box. A '< Previous' button is at the bottom left. A progress indicator at the top right shows 'Step 8 of 10'.

14. Read and indicate whether you agree to the attestations by checking the appropriate checkboxes and click the *Save & Continue* button. Please note, you must agree to all attestations to continue with the renewal process.

The screenshot displays the Registrant Portal interface for the College of Pharmacy of Newfoundland and Labrador. The top navigation bar includes a Messages icon and the user's name, Julie Reddy. The left sidebar contains a menu with categories: Home, Profile, Registration, and Requests. The main content area is titled "Registration Renewal" and shows "Step 9 of 10" for "Attestations". A note states: "All information with a red asterisk (*) is required." Below this, there are several checkboxes for attestation, each followed by a red asterisk indicating it is required. The checkboxes are: 1. The information contained in this application is complete and correct, and I recognize that providing false or incomplete information on this application may be cause for revocation of registration or an allegation of professional misconduct. 2. I will provide the Registrar with the details of any of the following that occur or arise during the registration year: a. A charge relating to an offence under any provincial or federal statute in Canada or another country. b. A finding of guilt or conviction in relation to an offence under any provincial or federal statute in Canada or another country. c. A restriction, suspension, or revocation in relation to my registration as a pharmacist by a pharmacy regulatory body in a Canadian or other jurisdiction. 3. I will notify the College of Pharmacy of Newfoundland and Labrador (CPNL) if I become registered in another jurisdiction during the registration year. 4. I will abide by the requirements of the Pharmacy Act, its Regulations, and the Bylaws, Code of Ethics, Standards of Practice, and Standards of Pharmacy Operation established by the College of Pharmacy of Newfoundland and Labrador (CPNL). 5. I have reviewed and understand the CPNL Policy on Collection, Use and Disclosure of Registrants' Personal Information and confirm that I consent to the collection, use, and disclosure of my personal information in accordance with this policy. 6. I agree to practice only within the limits of my own competence and have taken action to maintain competence in any areas of the practice of pharmacy in which I am engaged. 7. I have completed a minimum of 15 continuing education units this past year, of which at least 5 are from accredited programs, and I have documented these activities in my learning portfolio, in accordance with CPNL's Professional Development Requirements Interpretation Guide. 8. I have obtained professional liability insurance in accordance with CPNL's Professional Liability Insurance Requirements for Registration Interpretation Guide and understand that I am responsible for ensuring that this coverage is maintained throughout the year. I have uploaded a copy of my current annual certificate of coverage and understand that upon policy renewal I am required to upload the new certificate and update my policy information in the CPNL Registrant Portal. 9. I have obtained membership in the Pharmacists' Association of Newfoundland and Labrador, as required by section 26(6) of the Pharmacy Act, 2024 and understand that I am responsible for ensuring that this membership is maintained throughout the year. At the bottom of the form, there are two buttons: "< Previous" and "Save & Continue >". The "Save & Continue >" button is highlighted with a red border.

COLLEGE OF PHARMACY OF NEWFOUNDLAND AND LABRADOR

Home

Profile

Registrant Information

Employment Information

Educational Background

Certificate of Registration

Other Pharmacy Registrations

Professional Liability Insurance

First Aid/CPR Certifications

Registration

Document Upload

Professional Development

Registration Renewal

Authorizations

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Name Change Request

Document Request

Status Change Request

Application to be Designated Pharmacist-in-Charge of Existing Pharmacy

Invoices & Receipts

Account Settings

Registration Renewal

9 Attestations Step 9 of 10

Note: All information with a red asterisk (*) is required.

☐ The information contained in this application is complete and correct, and I recognize that providing false or incomplete information on this application may be cause for revocation of registration or an allegation of professional misconduct. *

☐ I will provide the Registrar with the details of any of the following that occur or arise during the registration year. *

- A charge relating to an offence under any provincial or federal statute in Canada or another country.
- A finding of guilt or conviction in relation to an offence under any provincial or federal statute in Canada or another country.
- A restriction, suspension, or revocation in relation to my registration as a pharmacist by a pharmacy regulatory body in a Canadian or other jurisdiction.

☐ I will notify the College of Pharmacy of Newfoundland and Labrador (CPNL) if I become registered in another jurisdiction during the registration year.

☐ I will abide by the requirements of the Pharmacy Act, its Regulations, and the Bylaws, Code of Ethics, Standards of Practice, and Standards of Pharmacy Operation established by the College of Pharmacy of Newfoundland and Labrador (CPNL). *

☐ I have reviewed and understand the CPNL Policy on Collection, Use and Disclosure of Registrants' Personal Information and confirm that I consent to the collection, use, and disclosure of my personal information in accordance with this policy. *

☐ I agree to practice only within the limits of my own competence and have taken action to maintain competence in any areas of the practice of pharmacy in which I am engaged. *

☐ I have completed a minimum of 15 continuing education units this past year, of which at least 5 are from accredited programs, and I have documented these activities in my learning portfolio, in accordance with CPNL's Professional Development Requirements Interpretation Guide. *

☐ I have obtained professional liability insurance in accordance with CPNL's Professional Liability Insurance Requirements for Registration Interpretation Guide and understand that I am responsible for ensuring that this coverage is maintained throughout the year. I have uploaded a copy of my current annual certificate of coverage and understand that upon policy renewal I am required to upload the new certificate and update my policy information in the CPNL Registrant Portal. *

☐ I have obtained membership in the Pharmacists' Association of Newfoundland and Labrador, as required by section 26(6) of the Pharmacy Act, 2024 and understand that I am responsible for ensuring that this membership is maintained throughout the year. *

< Previous

Save & Continue >

15. The payment screen summarizes the fees applicable to the renewal process. Select either *Cheque*, *Credit Card*, or *Money Order* from the *Method of Payment* dropdown box. Please note, credit cards will be processed online, while cheques or money orders must be sent to the address provided.

Home

Profile

- Registrant Information
- Employment Information
- Educational Background
- Certificate of Registration
- Other Pharmacy Registrations
- Professional Liability Insurance
- First Aid/CPR Certifications

Registration

- Document Upload
- Professional Development

Registration Renewal

- Authorizations

Requests

- Name Change Request
- Document Request
- Status Change Request
- Application to be Designated Pharmacist-in-Charge of Existing Pharmacy

Invoices & Receipts

Account Settings

Registration Renewal

10 Payment Step 10 of 10

Fee Breakdown

Invoice Item	Amount
Annual Pharmacist Registration Renewal Fee	\$1,279.83
HST	\$191.97
Total	\$1,471.80

Method of Payment

Please select the method of payment.
The College of Pharmacy of Newfoundland and Labrador does not provide refunds on fees.

Method of Payment

Select...
Select...
Cheque
Credit Card
Money Order

< Previous

16. Click the *Pay by...* button to proceed with payment and submit your renewal.

Certificate of Registration

Other Pharmacy Registrations

Professional Liability Insurance

First Aid/CPR Certifications

Registration

- Document Upload
- Professional Development

Registration Renewal

- Authorizations

Requests

- Name Change Request
- Document Request
- Status Change Request
- Application to be Designated Pharmacist-in-Charge of Existing Pharmacy

Invoices & Receipts

Account Settings

Registration Renewal

Fee Breakdown

Invoice Item	Amount
Annual Pharmacist Registration Renewal Fee	\$1,279.83
HST	\$191.97
Total	\$1,471.80

Method of Payment

Please select the method of payment.
The College of Pharmacy of Newfoundland and Labrador does not provide refunds on fees.

Method of Payment

Cheque

Amount Due

\$1,471.80

Cheque/money order Payment

If paying by cheque, make payment payable to:

College of Pharmacy of Newfoundland and Labrador
Suite 201
145 Kelsey Drive
St. John's, NL A1B 0L2
Canada

< Previous

Pay By Cheque/Money Order

17. You will receive an email to confirm that your renewal has been submitted. Please note, renewals are not approved until full payment of fees have been received.

