



Kent Hospital, 455 Toll Gate Road, Warwick, RI 02886  
(401) 227-3669 [kentri.org](http://kentri.org)

## Kent Hospital Pharmacy Training Program Application

**Application Packet must include the following (please order according to the list):**

1. Application Form
2. Letter of Intent
3. Previous Education

### Applicant Information:

Full name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary telephone number (including area code) \_\_\_\_\_

Primary e-mail: \_\_\_\_\_

Have you ever held or currently hold a valid Rhode Island pharmacy technician license? Yes \_\_\_\_ No \_\_\_\_

### Letter of intent:

On a separate page, please provide a letter of intent briefly describing your professional interests and achievements, reason(s) for applying to the Training Program, and your short-term career goals.

Please submit via email to the program contacts listed below, along with any questions.

Program	Contact Person	Email	Mail
Kent Hospital	Zachary Corbeil, CPhT Pharmacy Operations and Sterile Compounding Manager	<a href="mailto:zcorbeil@kentri.org">zcorbeil@kentri.org</a>	Zachary Corbeil Kent Hospital Pharmacy Department 455 Toll Gate Road, Warwick, RI 02886
Kent Hospital	Emily Salois, CPhT-Adv Pharmacy Training Coordinator	<a href="mailto:esalois@kentri.org">esalois@kentri.org</a>	Emily Salois Kent Hospital Pharmacy Department 455 Toll Gate Road, Warwick, RI 02886