



**We provide quality pharmacy professionals.**

100 E. Homer Adams Pkwy. Alton IL 62002 ph. 618.462.2484 fax 618.465.7221 www.metroph.com

Dear Pharmacy Professional,

I would like to take this opportunity to thank you for your interest in Metro RPh. At Metro RPh we are always working for you and looking for interesting and rewarding experiences. We strive to provide quality service to our clients and positive experiences for our pharmacy professionals.

In order to get you started off on the right foot with Metro RPh, I would like to help you familiarize yourself with our processes:

### **Getting Started:**

- Complete and sign the Pharmacy Professional Contractor Application Form
  - o please make sure to include current copies of your professional licenses for all states,
  - o your national certification (if applicable),
  - o and attach a copy of your most current resume
- Complete the Federal W-9 Form
- Attach copies of your social security card, driver's license and auto insurance
- HOSPITAL/LTC PROFESSIONALS – If you have a current PPD, drug screen, and/or skills assessment, please send them in with your Application Packet
- Return this information to Metro RPh
  - o Fax (618) 465-7221
  - o Mail to: 100 E. Homer Adams Pkwy., Alton, IL 62002

### **Assignment Selection:**

Upon receipt of your Application Packet (documentation listed above), Metro RPh will run a background check and start pairing your skill set and preferences with the needs of our clients. Assignments that fit your specific situation and expectations will be offered to you as they become available. Because you are your own boss, you are free to accept or turn down assignments at your own discretion. Not accepting an assignment does not adversely affect your working relationship with Metro RPh.

### **Accepting Assignments:**

When you accept an assignment with Metro RPh you agree to the following:

- Give your Metro RPh scheduler AT LEAST 24 hours notice when you cannot work your shift. It is helpful if you notify the facility as well but it is not mandatory.
- Show up at the client's location on time
- Wear the appropriate pharmacy technician attire
  - o Comfortable close toed shoes
  - o Clean scrubs
  - o Or khakis and a polo shirt – no jeans please
- Work the entirety of your scheduled shift
- Behave professionally to the client's supervisors, customers, and other personnel
- Submit an accurate time sheet signed by the client's representative (You DO NOT get paid for lunch unless you were in the pharmacy working while you ate).



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**Time Tracking:**

When you accept assignments with Metro RPh, we ask that you fill out both pages of your time sheet with your hours, your signature and the signature of the pharmacist/technician or human resources representative of the client. The first page is to be left with the client's representative for comparison with our invoice. The second page should include your mileage and other expenses that you might incur (such as lodging) while working with us. You must fax a completed copy of page two of the time sheet to our office by noon of the following Monday to be compensated in a timely manner. We cut checks two Fridays following the week worked (your direct deposit will be in your account on the Wednesday following the check date). Therefore, accurate timesheets submitted in a timely manner are necessary for a prompt and accurate check.

**End of Year Procedures:**

In accordance with Federal policies, Metro RPh will send out 1099 forms for the previous year every January. As a service to you, we include a complete detailed accounting of your reimbursement at year's end along with a letter breaking out your wage vs. expenses.

Please feel free to call our office with any questions you might have. I look forward to working with you.

Sincerely,

Brooks Fleetwood  
Metro RPh