



School of Pharmacy

TEMPLE UNIVERSITY

Regulatory Affairs and Quality Assurance Graduate Program

Temple University - School of Pharmacy
Regulatory Affairs and Quality Assurance Graduate Program
425 Commerce Drive, Suite 175 Fort
Washington, PA 19034
Phone: 267.468.8560 Fax: 267.468.8565

SPRING 2025 Registration Form for On-Campus Course at Fort Washington

This form is for On-Campus Courses only. Use the Online Registration Form for online courses. Email this form to QARAREG@temple.edu. New students must include a state residency form and a TOEFL and IELTS for degrees earned abroad.

Name _____

Continuing Students: 9-digit TUID number _____ TUMail _____

Home Address _____ (Check here, if address has changed) []

City _____ State _____ Zip _____

Are you a Pennsylvania Resident? Yes ___ No ___ If yes, for how long? _____

Home Phone _____ Work Phone _____ Ext _____

Home Email _____ Work Email _____

Name of Employer _____

Title _____ Department _____

Employer Street Address _____ Mailstop _____ ADDRESS CHANGE? []

City _____ State _____ Zip _____

Year received Undergraduate Degree _____ Major _____ Year received Master's _____ Major _____

Is this your first RAQA course at Temple?

Yes Did you include the state residency form? (We cannot process your registration without it).

No If no, how many courses have you completed so far? _____

Are you: ___ Non-Matriculated ___ Matriculated (accepted into the MS degree program)

Do you plan to pursue an MS Degree? Yes ___ No ___ Expected year to graduate: _____

If you answered yes, which degree: ___ MS in RAQA ___ MS in Pharm Regulatory Sciences ___ MS in GCPR ___ AMBRA

Which certificate are you interested in pursuing:

___ Drug Development ___ Basic Pharm Development ___ Clinical Trial Management ___ Food RA and QA

___ Global Pharmacovigilance ___ Labeling, Advertising, Promotions ___ Medical Devices ___ Generic Drugs

___ Pharm Manufacturing ___ Sterile Process Manufacturing ___ Validation Sciences ___ Biologics & Biosimilars: RA

___ Biologics & Biosimilars: Manufacturing ___ Post Master's Certificate

I agree to register for the following 3 credit hour course:

Table with 5 columns: Course ID, Course Name, and Meeting Time. Rows include 5536 (101) Good Clinical Practices (2:00 - 5:30 Tuesdays), 5592 (101) Food and Drug Law (2:00 - 5:30 Wednesdays), and 5650 (101) Leadership - Pharmaceutical Industry (2:00 - 5:30 Thursdays).

Applicant's Signature _____ Date _____

Tuition for 3-Credit Course: PA Resident: \$3,672, Non-Resident: \$4,566. University Services Fee: up to 4.9 credits: \$186.00; 5 - 8.9 credits: \$364.00; 9+ credits: \$508.00 Drop Policy: For a complete refund, you must submit the Course Withdrawal Form (see Forms on the RAQA website) BEFORE the third class meeting (weeknight classes) or before the second meeting (weekend classes). No exceptions.