



APPLICATION FOR THE CERTIFICATE OF CLINICAL COMPETENCE IN AUDIOLOGY – 2011 STANDARDS

This application is valid from January 1, 2011, to December 31, 2011.

Instructions

1. Applicants applying within three years of graduation from a CAA accredited graduate program need to complete and submit the following:
 - The three-page application form (pages one and two to be completed and signed by the applicant; page 3 to be completed and signed by the director of the graduate academic program. **All three pages must be submitted together**; partial applications are returned to the applicant;
 - An official graduate transcript which verifies the date and the degree awarded or a letter from the registrar verifying that all degree requirements have been met and the date the degree will be awarded;
 - Full payment in the form of a check or charge authorization. Applications submitted without payment cannot be processed. Charges accepted are Visa or MasterCard.

Applicants applying more than three years after graduation from a CAA accredited graduate program need to complete and submit the following:

- The three-page application form (pages one and two to be completed and signed by the applicant; page 3 to be completed and signed by the director of the graduate academic program. **All three pages must be submitted together**; partial applications are returned to the applicant;
 - Official graduate and undergraduate transcripts showing all course work completed for certification and the dates and degrees awarded;
 - Full payment in the form of a check or charge authorization. Applications submitted without payment cannot be processed. Charges accepted are Visa or MasterCard.
2. Please complete the application form in black ink.
 3. Applications must bear the original signatures of both the applicant and the director of the graduate educational program. Applications without original signatures are considered as incomplete and will be returned to the applicant.
 4. Please make and retain copies of all documents prior to submitting them to the ASHA National Office. Copies of documents are not available once certification is awarded.
 5. Please carefully review the application prior to submission to be certain that all sections have been completed. Incomplete applications will be returned to the applicant.
 6. All applications and payments must be sent to the PO Box address as listed on the top of the application form.

**Application processing time is approximately 4 to 6 weeks from the date
all required materials are received.**

**APPLICATION FOR CERTIFICATION AND MEMBERSHIP
 2011 AUDIOLOGY STANDARDS**

Please read all application instructions before completing and submitting this form.
ALL sections must be completed and original signatures must appear on the application.
 Please be sure that you are using the appropriate application for the standards under which you wish to apply.

I. BACKGROUND INFORMATION (Sections 1-5)
(1) Personal Information

Ms Name: _____
 Mrs _____
 Mr First Middle Previous Last
 Miss _____
 Dr Mailing Address: _____

_____ City State Zip

Social Security Number: _____

Daytime phone number: _____ Evening phone number: _____

E-mail address: _____ Fax number: _____

(2) Application Category

I am applying for (Please [√] the appropriate category):

- Membership and Certification in Audiology
- Certification in Audiology (without Membership)

My present affiliation with ASHA is (Please [√] the appropriate category):

- None ASHA Member only
- NSSLHA Member (NSSLHA Account Number _____)
- ASHA Certified Member in Speech ASHA Certificate Holder in Speech

I am a former member of ASHA Yes No

I am a former ASHA certificate holder Yes No

I am a former applicant for membership and/or certification Yes No

(3) Education – Official transcripts, or a letter from the registrar verifying the graduate degree, must be submitted by all applicants.

Institution Code (See appendix)	Education Began		Education Completed		Institution Name	Major	Date Degree Awarded	Degree
	Mo	Yr	Mo	Yr				
<i>Ex. R0291</i>	<i>08</i>	<i>2009</i>	<i>05</i>	<i>2011</i>	<i>Univ of Get My Degree</i>	<i>Audiology</i>	<i>06/12/2011</i>	<i>AuD</i>

Name of Applicant: _____
(Please print)

(4) Examination Information

I have taken and passed the Praxis Series examination in audiology and have listed ASHA as a score recipient (Please [✓] the appropriate response): yes No

Note: Only scores received directly from ETS are accepted for certification.

(5) Disclosure Information

1. Have you ever been convicted of (a) a misdemeanor involving dishonesty, physical harm to the person or property of another, or a threat of physical harm to the person or property of another, or (b) any felony? Please note that juvenile convictions are not required to be submitted.

Yes No

If yes, explain fully, including the nature of the offense, date of the offense, age at the time of conviction, whether incarcerated, fine or probation was imposed; rehabilitation; and any other relevant factors that you would like the CFCC to consider. Please use a separate piece of paper if necessary.

NOTE: A criminal conviction will not automatically preclude certification and/or membership. CFCC will consider all relevant factors.

2. Have you ever been disciplined or sanctioned by any professional association, professional licensing authority or board, or other professional regulatory body:

Yes No

If yes, explain fully. Please use a separate piece of paper if necessary.

NOTE: A disciplinary action or sanction will not automatically preclude certification and/or membership. CFCC will consider all relevant factors.

II. Affidavits (Section 6)

- A. I affirm that the information provided on this application is accurate.
- B. I have read and agree to abide by the Code of Ethics of the American Speech-Language-Hearing Association.
- C. I agree to abide by all standards required to maintain my certification, including payment of annual fees and participation in continuing professional development activities, and I understand that, once certified, my certification status may be made available to the public.

Signature: _____ Date: _____

Name of Applicant: _____
(Please print)

**2011 Standards for Clinical Certification in Audiology
Verification by Program Director**

Please respond to each question. The applicant must have met each standard in order to apply for certification.

The applicant has:

- Yes No Completed a course of study that addresses the knowledge and skills necessary to independently practice in the profession of audiology. (Std. I)
- Yes No Been granted a graduate degree from a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA). (Std. II)
- Yes No Completed a course of study that includes academic course work and a minimum of 1,820 hours of supervised clinical practicum sufficient in depth and breadth to achieve the knowledge and skills outcomes stipulated in Standard IV. Supervision was provided by individuals who held the ASHA Certificate of Clinical Competence (CCC) in Audiology. (Std. III)
- Yes No Knowledge delineated in Foundations of Practice (Std. IV. A1-A21)
- Yes No Knowledge and skills delineated in Foundations of Practice (Std. IV. A22-29)
- Yes No Knowledge and skills delineated in Prevention and Identification (Std. IV. B1-B6)
- Yes No Knowledge delineated in Assessment (Std. IV. C1)
- Yes No Knowledge and skills delineated in Assessment (Std. IV. C2-C11)
- Yes No Knowledge and skills delineated in Intervention (Treatment) (Std. IV. D1-D7)
- Yes No Knowledge and skills delineated in Advocacy/Consultation (Std. IV. E1-E3)
- Yes No Knowledge and skills delineated in Education/Research/Administration (Std. IV. F1-F6)
- Yes No Met the education program's requirements for demonstrating satisfactory performance through ongoing formative assessment of knowledge and skills. (Std. V-A)

The program director, or official designee, verifies that the student met each standard and has successfully met the education program's requirements.

Name of Program Director _____ Title _____
(Please print)

Signature _____ Date _____

Date coursework and clinical practicum requirements for ASHA certification were completed _____