

WEST VIRGINIA
SECRETARY OF STATE
KEN HECHLER
ADMINISTRATIVE LAW DIVISION

Form #1

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OFFICE OF WEST VIRGINIA
SECRETARY OF STATE

NOTICE OF PUBLIC HEARING ON A PROPOSED RULE

AGENCY: WV Board of Examiners for Speech-Language Pathology and Audiology TITLE NUMBER: 29

RULE TYPE: Procedural; CITE AUTHORITY W. Va. Code S30-32et. seq.

AMENDMENT TO AN EXISTING RULE: YES NO

IF YES, SERIES NUMBER OF RULE BEING AMENDED: _____

TITLE OF RULE BEING AMENDED: _____

IF NO, SERIES NUMBER OF NEW RULE BEING PROPOSED: 3

TITLE OF RULE BEING PROPOSED: Contested Case Hearing Procedure

DATE OF PUBLIC HEARING: Saturday, July 10, 1993 TIME: 10:00am

LOCATION OF PUBLIC HEARING: Charleston Marriott Hotel

200 Lee Street East

Charleston, WV 25301

COMMENTS LIMITED TO: ORAL , WRITTEN , BOTH

COMMENTS MAY ALSO BE MAILED TO THE FOLLOWING ADDRESS: W.V.B.E.S.L.P.A.

PO Box 2136

The Department requests that persons wishing to make comments at the hearing make an effort to submit written comments in order to facilitate the review of these comments.

Weirton, WV 26062

The issues to be heard shall be limited to the proposed rule.

ATTACH A **BRIEF** SUMMARY OF YOUR PROPOSAL

11-40

**West Virginia Board of Examiners for Speech-Language Pathology and Audiology
P. O. Box 2136
Weirton, WV 26062-1336**

TITLE 29

PROCEDURAL RULE

**WEST VIRGINIA BOARD OF EXAMINERS FOR SPEECH-LANGUAGE PATHOLOGY
AND AUDIOLOGY**

SERIES 3

CONTESTED CASE HEARING PROCEDURE

These procedural rules establish procedures for the adjudication of contested case hearings before the Board.

APPENDIX B

FISCAL NOTE FOR PROPOSED RULES

Rule Title: Contested Case Hearing Procedure

Type of Rule: Legislative Interpretive XX Procedural

Agency WV Board of Examiners for Speech-Language Pathology and Audiology

Address PO Box 2136

Weirton, WV 26062

1. Effect of Proposed Rule Not Applicable

	ANNUAL FISCAL YEAR				
	INCREASE	DECREASE	CURRENT	NEXT	THEREAFTER
<u>ESTIMATED TOTAL COST</u>	\$	\$	\$	\$	\$
PERSONAL SERVICES					
CURRENT EXPENSE					
REPAIRS & ALTERNATIONS					
EQUIPMENT					
OTHER					

2. Explanation of above estimates:

Not Applicable

3. Objectives of these rules:

Not Applicable

Rule Title: Contested Case Hearing Procedure

4. Explanation of Overall Economic Impact of Proposed Rule.

A. Economic Impact on State Government.

Not Applicable

B. Economic Impact on Political Subdivisions; Specific Industries; Specific groups of Citizens.

Not Applicable

C. Economic Impact on Citizens/Public at Large.

Not Applicable

Date: 6-7-93

Signature of Agency Head or Authorized Representative

Joyce L. Earley, Secretary

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JUN 8 2 45 PM '93

TITLE 29
PROCEDURAL RULE

WEST VIRGINIA BOARD OF EXAMINERS FOR SPEECH-LANGUAGE PATHOLOGY
AND AUDIOLOGY

OFFICE OF WEST VIRGINIA
SECRETARY OF STATE

SERIES 3

CONTESTED CASE HEARING PROCEDURE

§29-3-1. General.

1.1. Scope. -- These procedural rules establish procedures for the adjudication of contested case hearings before the Board.

1.2. Authority. -- W. Va. Code §§ 30-32-1 et seq., 30-1-1 et seq. and 29A-5-1 et seq.

1.3. Filing Date. -- _____, 1993

1.4. Effective Date. -- _____, 1993

§29-3-2. Definitions.

The following words and phrases as used in these rules shall have the following meanings, unless the context otherwise requires:

2.1. "Board" means the West Virginia Board of Examiners for Speech-Language Pathology and Audiology.

2.2. The term "demanding party" means an individual who has been denied a license to practice speech-language pathology and audiology by the Board and who, as a result, demands that a hearing be held before the Board on the issue of such denial.

2.3. The term "charged party" means an individual who holds a license to practice speech-language pathology and audiology issued by the Board and who has been charged by the Board as described in §29-3-3.4 of these rules.

2.4. The term "licensee" means an individual who holds a license to practice speech-language pathology and audiology by the Board.

§29-3-3. Hearing Procedures.

3.1. Any person denied a license by the Board who believes such denial was in violation of W. Va. Code §§30-1-1 et seq. and/or 30-32-1 et seq. shall be entitled to a hearing on the action denying the license.

3.2. Any person who desires a hearing for the reason described in subsection 3.1 of this section must present a written demand for such to the Board.

3.3. When the president of the Board or his or her authorized designee is presented with such a demand for a hearing, he or she shall schedule a hearing within forty-five (45) days of receipt by him or her of such written demand, unless postponed to a later date by mutual agreement.

3.4. Charges may be instituted against any speech-language pathologist or audiologist by the Board when reasonable cause exists for believing that the speech-language pathologist or audiologist may have engaged in conduct or be in such condition that his or her license should be suspended, revoked or otherwise disciplined for one or more of the grounds set forth in W. Va. Code §30-32-1 et seq. of the Board's legislative rules. Charges may be based upon information received by way of a verified written complaint filed with the Board and further information gathered by the Board in the process of investigating such complaint. Charges may also be based upon information received solely through investigative activities undertaken by the Board.

3.5. Charges instituted against a licensee as described in subsection 3.4 of this section shall be set forth in a Complaint and Notice of Hearing issued in the name of the Board as the agency of the State regulating the practice of speech-language pathology and audiology. Such Complaint and Notice of Hearing shall designate the Board as "Complainant", and shall designate the speech-language pathologist or audiologist involved in the proceeding as the "Respondent"; shall set out the substance of each offense charged with sufficient particularity to reasonably apprise the Respondent of the nature, time and place of the conduct or

condition complained of therein; shall state the date, time and place for the hearing; and, shall contain a statement of intention by the Board to appoint a hearing examiner.

3.6. The Board may amend the charges set forth in a Complaint and Notice of Hearing as it deems proper.

3.7. A Complaint and Notice of Hearing shall be served upon the demanding or charged party at least thirty (30) days prior to the date of the hearing.

3.8. Upon written motion received by the Board no later than twenty (20) days prior to the date of hearing, a more definite statement of the matters charged or the reasons stated for denial of licensure shall be provided to the demanding or charged party or his or her counsel, at least fifteen (15) days prior to the hearing date.

3.9. Hearings shall be conducted as follows:

(a) Any party to a hearing shall have the right to be represented by an attorney-at-law, duly qualified to practice law in the State of West Virginia.

(b) The Board may be represented by the West Virginia Attorney General's Office.

(c) Irrelevant, immaterial, or unduly repetitious evidence shall be excluded from the hearing. Furthermore, the rules of evidence as applied in civil cases in the circuit courts of this State shall be followed. However, when necessary to ascertain facts not reasonably susceptible of proof under those rules, evidence not admissible thereunder may be admitted, except where precluded by statute, if it is of a type commonly relied upon by reasonably prudent persons in the conduct of their affairs.

(d) The rules of privilege recognized by the law of this State shall be followed.

(e) Objections to evidentiary offers shall be noted in the record. Any party to the hearing may vouch the record as to any excluded testimony or

evidence.

(f) Any party to a hearing may appear with witnesses to testify on his or her behalf; may be heard in person, by counsel or both; may present such other evidence in support of his or her position as deemed appropriate, may cross-examine witnesses called by the Board in support of the charges or in defense of its decision to deny licensure.

(g) The hearing shall be held at such time and place as is designated by the Board, but no hearing shall be conducted unless at least thirty (30) days written notice thereof has been served upon the charged or demanding party and/or his or her attorney in person; or if he or she cannot be found, by delivering such notice at his or her usual place of abode, and giving information of its purport, to his wife or her husband, or to any other person found there who is a member of his or her family and above the age of sixteen years; or if neither his wife or her husband nor any such person can be found there, and he or she cannot be found, by leaving such notice posted at the front door of such place of abode; or if he or she does not reside in this State, such notice may be served by the publication thereof once a week for three consecutive weeks in a newspaper published in this State; or such notice may be served by registered or certified mail.

(h) The hearing shall be open to the general public.

(i) Members of the Board and its officers, agents and employees shall be competent to testify at the hearing as to material and relevant matters: Provided, that no member of the Board who testifies at such hearing shall thereafter participate in the deliberations or decisions of the Board with respect to the case in which he or she so testified.

(j) The hearing may be conducted by one or more Board members or by a hearing examiner appointed by the Board.

(k) A record of the hearing, including the complaint(s), if applicable,

the notice of hearing, all pleadings, motions, rulings, stipulations, exhibits, documentary evidence, evidentiary depositions and the stenographic report of the hearing, shall be made and a transcript thereof maintained in the Board's files. Upon request, a copy of the transcript shall be furnished to any party at his or her expense.

(l) Documentary evidence may be received in the form of copies or excerpts or by incorporation by reference.

(m) Where a hearing is held upon the instance of the Board after charges have been brought against a licensee pursuant to subsections 3.4 and 3.5 of this section, the Board shall have the burden of proof and shall present its evidence and/or testimony in support of the charges first.

(n) Where a hearing is held upon demand under the provisions of subsections 3.1., 3.2., 3.3. and 3.6. of this section, the demanding party shall have the burden of proof and shall therefore be required to present his or her evidence first.

(o) Following the conclusion of the Board's presentation of evidence in accordance with subsection 3.10(m) of this section, the Respondent or charged party shall have the right to submit his or her evidence in defense.

(p) Following the conclusion of the demanding party's presentation of evidence in accordance with subsection 3.10(n) of this section, the Board shall have the right to submit its evidence in defense.

(q) The Board may call witnesses to testify in support of its decision to deny licensure or in support of the charges instituted against a licensee; may present such other evidence to support its position; and, may cross-examine witnesses called by the demanding party or charged party in support of his or her position.

(r) All parties shall have the right to offer opening and closing arguments, not to exceed ten (10) minutes for each presentation.

(s) Hearings held by the Board as a result of charges instituted against a licensee may be continued or adjourned to a later date or a different place by the Board or its designee by appropriate notice to all parties.

(t) Motions for a continuance of a hearing may be granted upon showing of good cause. Motions for continuance must be in writing and received in the office of the Board no later than seven (7) days prior to the hearing date. In determining whether good cause exists, consideration will be given to the ability of the party requesting the continuance to proceed effectively without a continuance. A motion for a continuance filed less than seven (7) days from the date of hearing shall be denied unless the reason for the motion could not have been ascertained earlier. Motions for continuance filed prior to the date of hearing may be ruled on by the Executive Secretary or Assistant Executive Secretary of the Board or designated hearing examiner. All other motions for continuance shall be ruled on by the Board member(s) or the hearing examiner presiding over the hearing.

(u) All motions related to a case set for hearing before the Board, except motions for continuance and those made during the hearing, shall be in writing and shall be received in the office of the Board at least ten (10) days before the hearing. Prehearing motions shall be heard at a prehearing conference or at the hearing prior to the commencement of testimony. The Board member(s) or the hearing examiner presiding at the hearing shall hear the motions and the response from the non-moving party and shall rule on such motions accordingly.

§29-3-4. Transcription of Testimony and Evidence.

4.1. All testimony, evidence, arguments and rulings on the admissibility of testimony and evidence shall be recorded by the stenographic notes and characters or by mechanical means.

4.2. All recorded materials shall be transcribed. The Board shall have the responsibility to make arrangements for the transcription of the recorded

testimony and evidence.

4.3. Upon the motion of the Board or any party assigning error or omission in any part of the transcript, the Board or its appointed hearing examiner shall settle all differences arising as to whether such transcript truly discloses what occurred at the hearing and shall direct that the transcript be corrected and/or revised as appropriate so as to make it conform to the truth.

4.4. A Transcript of the hearing shall be provided to all members of the Board for review at least ten (10) days before the vote is taken on its decision in any licensure or licensure disciplinary matter.

§29-3-5. Submission of Proposed Findings of Fact and Conclusions of Law.

5.1. Any party may submit proposed findings of fact and conclusions of law at a time and manner designated by the Board or its duly appointed hearing examiner.

§29-3-6. Hearing Examiner.

6.1. The Board may appoint a hearing examiner who shall be empowered to subpoena witnesses and documents, administer oaths and affirmations, examine witnesses under oath, rule of evidentiary matters, hold conferences for the settlement of simplification of issues by consent of the parties, cause to be prepared a record of the hearing so that the Board is able to discharge its functions and otherwise conduct hearings as provided in §19-5-3.10. herein.

6.2. Hearing examiners appointed by the Board are not authorized or empowered to grant, suspend, revoke or otherwise discipline any license.

6.3. The hearing examiner shall prepare recommended findings of fact and conclusions of law for submission to the Board. The Board may adopt, modify or reject such findings of fact and conclusions of law.

§29-3-7. Conferences; Informal Disposition of Cases.

7.1. At any time prior to the hearing or thereafter, the Board, its designee or its duly appointed hearing examiner may hold conferences for the following

purposes:

- (a) To dispose of procedural requests, prehearing motions or similar matters;
- (b) To simplify or settle issues by consent of the parties; or
- (c) To provide for the informal disposition of cases by stipulation or agreement.

7.2. The Board or its appointed hearing examiner may cause such conferences to be held on its own motion or by the request of a party.

7.3. The Board may also initiate or consider stipulation or agreement proposals with regard to the informal disposition of cases and may enter into such stipulations and/or agreements without conference.

§ 29-3-8. Depositions.

8.1. Evidentiary depositions may be taken and read or otherwise included into evidence as in civil actions in the circuit courts of this State.

§29-3-9. Subpoenas.

9.1. Subpoenas to compel the attendance of witnesses and subpoenas duces tecum to compel the production of documents may be issued by the Board, its Executive Secretary, its Assistant Executive Secretary and by the hearing examiner appointed by the Board. Such subpoenas shall be issued pursuant to W. Va. Code §29A-5-1(b).

9.2. Written requests by a party for the issuance of subpoenas and subpoenas duces tecum as provided in subsection 9.1 of this section must be received by the Board no later than ten (10) days before a scheduled hearing. Any party requesting the issuance of subpoenas and subpoenas duces tecum shall see that they are properly served in accordance with W. Va. Code §29A-5-1(b).

§29-3-10. Orders.

10.1. Any final order entered by the Board following a hearing conducted pursuant to these rules shall be made pursuant to the provisions of W. Va. Code §§

29A-5-3 and 30-1-8(d). Such orders shall be entered within forty-five (45) days following the submission of all documents and materials necessary for the proper disposition of the case, including transcripts, and shall contain findings of fact and conclusions of law.

10.2. The findings of fact and conclusions of law must be approved by a majority of the Board either by a poll or vote at a regular meeting, before a final order is entered. A copy of the final order approved by a majority of the Board shall be served upon the demanding or charged party and/or his attorney of record, if any, within five (5) days after entry by the Board by personal service or by registered or certified mail.

§29-3-11. Appeal.

11.1 An appeal from any final order entered in accordance with these rules shall comply with the provisions of W. Va. Code §30-1-9.

APPENDIX ONE

FEEES

Initial application - provisional or professional (non-refundable)	\$50.00
Licensure in speech-language pathology (two years)	\$100.00
Licensure in audiology (two years)	\$100.00
Licensure in speech-language pathology and audiology (two years)	\$150.00
Renewal in speech-language pathology (two years)	\$75.00
Renewal in audiology (two years)	\$75.00
Renewal for speech-language pathology and audiology (two years)	\$100.00
Renewal late fee	\$25.00
Reinstatement fee	\$50.00
Provisional license in speech-language pathology (one year)	\$50.00
Provisional license in audiology (one year)	\$50.00
Professional license fee for applications received during the first quarter of the two year licensure period	\$100.00
Professional license fee for applications received during the second quarter of the two year licensure period	\$75.00
Professional license fee for applications received during the third quarter of the two year licensure period	\$50.00
Professional license fee for applications received during the fourth quarter of the two year licensure period	\$25.00

APPENDIX TWO
ACADEMIC CLINICAL PRACTICUM REQUIREMENTS

For applicants applying after January 1, 1993:

350 clock hours will be required in the following manner:

- (A) 250 of these hours must be in the major professional area;
- (B) 50 hours must be in each of three types of clinical settings;

For licensure in speech-language pathology:

At least 20 hours in each of the following eight categories:

1. Evaluation: speech disorders in children;
2. Evaluation: speech disorders in adults;
3. Evaluation: language disorders in children;
4. Evaluation: language disorders in adults;
5. Treatment: speech disorders in children;
6. Treatment: speech disorders in adults;
7. Treatment: language disorders in children;
8. Treatment: language disorders in adults;

Up to 20 clock hours in the major professional area may be in related disorders.

At least 35 of the 350 hours must be in audiology:

15 of these hours must involve the evaluation or screening of hearing;

15 of these hours must involve the habilitation/rehabilitation of individuals who have hearing impairment.

For licensure in audiology:

250 of the 350 hours must be in audiology;

40 of the 250 hours must be completed in categories 1 and 2;

80 of the 250 hours must be completed in categories 3 and 4:

at least 10 hours must be completed in each of categories 1 through 4.

20 of the 250 hours must be completed in category 5.

Categories:

1. Evaluation: hearing in children

2. Evaluation: hearing in adults

3. Selection and use: amplification and assistive listening devices for children

4. Selection and use: amplification and assistive listening devices for adults

5. Treatment: hearing disorders in children and adults

Up to 20 hours in the major area may be in related disorders.

35 of the 350 clock hours must be in speech-language pathology:

15 of those hours must involve the evaluation or screening of individuals for speech and language disorders unrelated to hearing;

15 of those hours must involve the treatment of speech and language disorders unrelated to hearing impairment.

APPENDIX THREE
POSTGRADUATE PROFESSIONAL EXPERIENCE

The post-graduate professional experience may be obtained in any one of a number of diverse employment settings. The determination of whether a given setting is appropriate for the clinical fellow is made by applying first the criterion of whether the particular program is designed to evaluate, habilitate, or rehabilitate the communicative functioning of speech, language, and hearing handicapped persons. Second, the program must afford the possibility that the clinical fellowship year supervisory requirements can be met.

The type and amount of experience which will be acceptable during the clinical fellowship year is defined as no less than nine months of full time professional employment (a minimum of 30 hours per week).

This requirement can also be met by less than full-time employment as follows:

1. work of 15-19 hours per week over 18 months;
2. work of 20-24 hours per week over 15 months;
3. work of 25-29 hours per week over 12 months.

In the event that part-time employment is used to fulfill a part of the clinical fellowship year, 100% of the minimum hours of the part-time work per week requirement must be spent in direct professional experience as defined above. Professional employment of less than 15 hours per week will not fulfill any part of this requirement. If the clinical fellowship year is not initiated within two years of the date the academic and practicum education is completed, the clinical fellow must meet the academic and practicum requirements current when the clinical fellowship year is begun. The clinical fellowship year must be completed within a

maximum of 36 months.

It is the interpretation of the West Virginia board of examiners for speech-language pathology and audiology that at least 80% of the clinical fellowship year work week, must be in direct client contact (assessment, diagnosis, evaluation, screening, habilitation, or rehabilitation) and activities related to client management.

Only individuals holding current West Virginia licensure in speech-language pathology or audiology are eligible to supervise applicants during the postgraduate professional experience. Names of qualified individuals can be obtained from the board.

Supervision of the clinical fellow must include direct observation of diagnostic and therapeutic procedures. Other supervisory activities include:

1. Conferring with the clinical fellow concerning clinical treatment strategies;
2. Monitoring changes in patients' communication behaviors;
3. Evaluating the clinical fellow's clinical records, including:
 - a. Diagnostic reports
 - b. Treatment records
 - c. Correspondence
 - d. Plans of treatment
 - e. Summaries of clinical conferences
4. Monitoring the clinical fellow's participation in case conferences
5. Evaluating the clinical fellow by professional colleagues
6. Evaluating the clinical fellow's work by patients and their parents
7. Monitoring the clinical fellow's contributions to professional meetings

and publications, as well as participation in other professional growth opportunities.

Items 3,4,5,6 and 7 above may be conducted by correspondence. Clinical fellowship year supervision must entail the personal and direct involvement of the supervisor in any and all ways that will permit the clinical fellowship year supervisor to monitor, improve and evaluate the clinical fellow's performance in the professional employment. The clinical year fellowship supervisor must base the total evaluation on no less than 36 supervisory activities during the clinical fellowship year. The supervisor must include 18 on-site observations of the clinical fellow (1 hour = one on-site observation; up to 6 hours may be accrued in one day; at least 6 on-site observations must be accrued during each third of the experience). The clinical fellowship year supervisor must complete 18 other monitoring activities (at least one per month).

Since one purpose of the clinical fellowship year is to improve the clinical effectiveness of the clinical fellow, supervisors must share and discuss their evaluations with the clinical fellow throughout the clinical fellowship year. The board recommends that written evaluations be used during these discussions. Where multiple supervisors are utilized, it will be the responsibility of the clinical fellow to collate the evaluations and clinical fellowship year reports from all supervisors and be responsible for certifying that all state licensure requirements are met. All supervisors must hold West Virginia licensure in the appropriate area.

The clinical year fellowship report (see appendix four a) must be submitted to the board within 30 days of the completion of the clinical fellowship year.

APPENDIX FOUR

FORMS

- a. Clinical fellowship year report
- b. Application for license renewal
- c. License application form

A.

CLINICAL CERTIFICATION BOARD
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION
10801 Rockville Pike, Rockville, MD 20852

Certification File Number _____

REQUIRED CLINICAL FELLOWSHIP YEAR REPORT
(Revised 1989)

Please refer to the instructions on page 24 before completing this CFY Report. An application on pages 15-22 for membership and certification must be submitted at this time if you have not already done so.

I. Clinical Fellow: _____
 Address: _____
(last) (first) (middle) (maiden)
(street) (city) (state) (zip)
 Home Telephone Number (____) _____ Social Security # _____
 Academic Status _____
(graduate university) (degree) (date conferred)
 Accredited by ASHA's Educational Standards Board (ESB) yes no
 Date coursework and practicum requirements completed _____
(must precede CFY beginning date)

II. CFY Supervisor: _____
 Address: _____
(last) (first) (middle) (maiden)
(street) (city) (state) (zip)
 Telephone Number: Home: (____) _____ Work: (____) _____
 Place of Employment _____
(facility name)
 ASHA Certification: Speech-Language Pathology Audiology
 ASHA Account Number: _____ Social Security # _____
(on ASHA wallet card)

III. CFY Setting: _____
(facility name)
 Address: _____
(street)
(city) (state) (zip) Phone (____) _____
 Is this facility accredited by ASHA's Professional Services Board (PSB)? yes no

IV. Beginning Date of CFY* ____/____/____ **Ending Date of CFY** ____/____/____
*Coursework and practicum for certification must be completed prior to this date.
 If this report is only for a portion of your CFY, indicate the exact dates here: ____/____/____ to ____/____/____
 How many months of your CFY does this report cover? _____
 How many hours per week were spent in Speech-Language Pathology? _____ Audiology? _____
 Was a CFY PLAN pre-approved by the Clinical Certification Board for the experience this report covers? yes no
 If yes, was the CFY PLAN implemented as submitted? yes no

V. Clinical fellows performing the CFY in a PSB accredited program need not complete this section. Section V must be completed if the program is not PSB accredited, if a CFY plan was not pre-approved or if the plan was not implemented as described. It is the interpretation of the Clinical Certification Board that at least 80% of the CFY work week must be in direct client contact (assessment/diagnosis/evaluation, screening, habilitation/rehabilitation) and activities related to client management. Specify how many hours per week were spent in the following activities:

1. ____ Assessment/diagnosis/evaluation
2. ____ Screening
3. ____ Habilitation/Rehabilitation
4. ____ Activities related to client management (client reports, client conferences, family counseling, etc.), specify here: _____
5. ____ Inservice training
6. ____ Other (specify here) _____
7. ____ Total hours per week

NOTE: A SEPARATE CFY REPORT MUST BE SUBMITTED FOR EACH CHANGE IN SITE, SUPERVISOR OR HOURS PER WEEK (i.e. 30, 25, 20, or 15 hours per week).

Complete Chart A indicating the number of on-site observation hours and other monitoring activities completed during each month (CHRONOLOGICALLY). Refer to Chart B for the required number of months and complete Chart A only for the months that this report covers.

CHART A: CFY Supervision

Months of CFY	Number of On-Site Hours	Number of Other Monitoring Activities
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
Total Hours _____	Activities _____	

CHART B: CFY Time Requirements

REQUIRED NUMBER OF MONTHS FOR THE CFY WHEN WORKING THE FOLLOWING NUMBER OF HOURS EACH WEEK:

15-19 hours/week must work 18 months
 20-24 hours/week must work 15 months
 25-29 hours/week must work 12 months
 30+ hours/week must work 9 months

If you have changed from one category to another (i.e., switched from 16 to 35 hours per week) you must submit a separate report for each category.

- VI. Were all 18 on-site observations in direct client contact? (Refer to page 24 of instructions.)
 yes
 no (Please attach written explanation).
- VII. Was direct expense reimbursement of the CFY supervisor utilized during the CFY experience?
 yes _____
(total amount)
 no

VIII. I have read and discussed this report with my CFY Supervisor and this CFY or CFY portion is complete. Furthermore, I checked and found that my supervisor held current certification. If it is determined at a later date that this statement is not true, I, not ASHA, assume full responsibility for an invalid CFY.

SIGNATURE OF CLINICAL FELLOW _____ DATE _____

IX. A. AS THE CFY SUPERVISOR, DO YOU RECOMMEND THAT THIS CLINICAL FELLOW'S CFY REPORTED ABOVE BE APPROVED BY THE CLINICAL CERTIFICATION BOARD (CCB) TOWARD MEETING THE REQUIREMENTS FOR THE CCC? If no, please refer to CFY instructions, page 24 of the Membership and Certification Handbook.

YES [] NO []

B. I have discussed this report with the Clinical Fellow. Furthermore, I certify that my certification was current throughout this CFY.

SIGNATURE OF SUPERVISOR _____ DATE _____

X. I, the director of the PSB-accredited program, verify that this CFY was completed in accordance with the "Clinical Fellowship Year Requirements and Procedures."

SIGNATURE OF DIRECTOR _____ DATE _____

B. West Virginia Board of Examiners for Speech-Language Pathology and Audiology
P. O. Box 2136
Weirton, WV 26062-1336
APPLICATION FOR LICENSE RENEWAL

1. Please print in ink or type.
2. Answer all questions. Write 'NOT APPLICABLE' if no other response is appropriate.
3. Mail completed application with check to above address.
4. Make check payable to WVBESLPA.

Area of Licensure Speech-Language Pathology Audiology Dual SLP/A
 License # SLP-_____ License # A-_____

Type of application: 2 year Professional License Renewal
 1 year Provisional (CFY) License Renewal

FULL NAME: _____
 LAST FIRST MIDDLE MAIDEN

HOME ADDRESS: _____
 NUMBER STREET APT. NO.

 CITY COUNTY STATE ZIPCODE

HOME PHONE: () _____ -- **SSN:** _____ -- --

EMPLOYMENT RECORD:
 LIST PRESENT PLACE(S) OF EMPLOYMENT IF DIFFERENT FROM ORIGINAL APPLICATION. IF THERE HAS BEEN NO CHANGE DURING THE LICENSURE PERIOD, PLEASE CHECK HERE () 'SAME', AND SKIP TO THE NEXT SECTION.

EMPLOYERS
NAME: _____
 FULL TIME PART TIME EMPLOYED FROM: _____ TO: _____

ADDRESS: _____
 NUMBER STREET APT. NO.

 CITY COUNTY STATE ZIPCODE

PHONE NUMBER: () _____ -- **EXTENSION:** _____

LIST ALL OTHER EMPLOYERS ON SEPARATE SHEET AS NECESSARY

List additional academic degrees earned during the previous licensure period, or check () 'NONE'.

COLLEGE/UNIVERSITY GRADUATED	MAJOR (AS STATED ON TRANSCRIPT)	DEGREE	DATE
---------------------------------	--	--------	------

NAME: _____ SSN: _____ -- --

DURING THE PREVIOUS LICENSURE PERIOD:

Yes No

Have you had ANY license request denied or ANY held license revoked or suspended ?

Yes No

Have you ever been convicted or plead guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside ?

Yes No

Have you ever been found guilty of unethical practices in the conduct of ANY business or profession ?

Yes No

Are you presently being treated for any serious contagious disease, mental incompetency or addiction to a controlled substance, narcotic or alcohol which is likely to endanger the health, welfare or safety of the public ?

If Yes, to any answer, please provide detailed information on separate sheet.

PLEASE ATTACH YOUR 'CONTINUING EDUCATION CREDIT REQUEST' FORM WITH VERIFICATION OF TEN (10) HOURS OF APPROVED CONTINUING EDUCATION CREDIT EARNED DURING THE LICENSURE PERIOD FOR EACH LICENSE YOU WISH TO RENEW (i.e., 20 HOURS FOR DUAL CERTIFICATION)

The Board holds the right to request additional information, so deemed necessary, from any applicant, for review. Failure to provide complete information requested on this application will result in a delay in processing and issuance of your license renewal.

THE BOARD SHALL HOLD IN STRICTEST CONFIDENCE ALL INFORMATION HEREIN SUBMITTED BY THIS APPLICATION.

STATEMENT BY APPLICANT:

I HEREBY CERTIFY THAT ALL STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I RECOGNIZE THAT ANY MISINFORMATION OR OMISSION OF PERTINENT MATERIAL FACTS MAY BE CAUSE FOR DENIAL OF LICENSE RENEWAL OR FOR SUSPENSION OR REVOCATION OF THIS LICENSE.

DATE

SIGNATURE OF APPLICANT

State of _____

County of _____

Given under my hand this _____ day of _____, 19 _____.

Signature of Notary Public

My commission expires on: _____

(SEAL)

C. West Virginia Board of Examiners for Speech-Language Pathology and Audiology
P. O. Box 2136
Weirton, WV 26062-1336

1. Please print in ink or type.
2. Answer all questions. Write 'NOT APPLICABLE' if no other response is appropriate.
3. Mail completed application with check to above address.
4. Make check payable to WVBESLPA in the amount of \$50.00.
5. APPLICATION FEE IS NON-REFUNDABLE

Area of Licensure sought: Speech-Language Pathology Audiology Dual SLP/A

Type of application: 2 year Professional License Initial Exemption Request (NO FEE)
 2 year Professional License Renewal Please complete form.
 1 year Provisional (CFY) License Initial
 1 year Provisional (CFY) License Renewal

FULL NAME: _____
LAST FIRST MIDDLE MAIDEN

Please print name and degree as you wish it to appear on your certificate:

HOME ADDRESS: _____
NUMBER STREET APT. NO.

CITY _____ COUNTY _____ STATE _____ ZIPCODE _____
 HOME PHONE: (____) _____ -- _____ SEX: F M

SSN: _____ -- -- _____ BIRTHDATE: ____ / ____ / ____

EMPLOYMENT RECORD:
 LIST MOST RECENT EXPERIENCE FIRST

EMPLOYERS NAME: _____
 FULL TIME PART TIME EMPLOYED FROM: _____ TO: _____

ADDRESS: _____
NUMBER STREET APT. NO.

CITY _____ COUNTY _____ STATE _____ ZIPCODE _____
 PHONE NUMBER: (____) _____ -- _____ EXTENSION: _____

EMPLOYERS NAME: _____
 FULL TIME PART TIME EMPLOYED FROM: _____ TO: _____

ADDRESS: _____
NUMBER STREET APT. NO.

CITY _____ COUNTY _____ STATE _____ ZIPCODE _____

PHONE NUMBER: (____) _____ -- _____ EXTENSION: _____

LIST ALL OTHER EMPLOYERS ON SEPARATE SHEET AS NECESSARY

NAME: _____ SSN: _____ -- --

A. Yes No Do you hold a Certificate of Clinical Competence (CCC) in Speech-Language Pathology and/or Audiology from the American Speech-Language-Hearing Association ?
 Speech-Language Pathology Yes No
 Audiology Yes No

Verification must be submitted with application - - - - See INSTRUCTIONS

If NO, Have you passed the National Examination in Speech-Language Pathology or Audiology ? Yes No

Verification of passing examination must be submitted with application

If NO, You are INELIGIBLE for licensure in the State of West Virginia.

B. Yes No Is application made on the basis of reciprocity of license as a Speech-Language Pathologist or an Audiologist in another state ?

If yes, attach copies of your current license(s) held.

State: _____ License number: _____

Expiration Date: _____ Length of time held: _____
in years

State: _____ License number: _____

Expiration Date: _____ Length of time held: _____
in years

Licensing state must have standards at least equal to the State of West Virginia. Out-of-state license must be valid and current. If reciprocity is denied, Applicant may still apply. Initial application fee of \$50.00 must accompany this application.

A statement from the Board of your licensing state verifying that you are currently licensed as a Speech-Language Pathologist or Audiologist in that state, and in good standing must accompany this application.

C. List all academic degrees held:

COLLEGE/UNIVERSITY MAJOR DEGREE DATE GRADUATED
(AS STATED ON TRANSCRIPT)

NAME: _____ SSN: _____ -- --

D. Yes No

Have you ever had ANY license request denied or ANY held license revoked or suspended ?

E. Yes No

Have you ever been convicted or plead guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside ?

F. Yes No

Have you ever been found guilty of unethical practices in the conduct of ANY business or profession ?

G. Yes No

Are you presently being treated for any serious contagious disease, mental incompetency or addiction to a controlled substance, narcotic or alcohol which is likely to endanger the health, welfare or safety of the public ?

If Yes, to any answer D through G, please provide detailed information on separate sheet.

If this application is for a Provisional License, the applicant must submit to the Board, a COMPLETED copy of the American Speech-Language-Hearing association approved Clinical Fellowship Year (CFY) plan.

A person holding a Provisional License is authorized to practice Speech-Language Pathology or Audiology only while working under the supervision of a person fully licensed BY THIS STATE in accordance with this Article.

The Board holds the right to request additional information, so deemed necessary, from any applicant, for review.

Any future correspondence with the Board shall bear the Applicant's full name and social security number as it appears on the original application.

The Applicant is held responsible in the notification of the Board, of changes in the Applicant's name or address. Such changes to be submitted within 30 days of that change.

THE BOARD SHALL HOLD IN STRICTEST CONFIDENCE ALL INFORMATION HEREIN SUBMITTED BY THIS APPLICATION.

NAME: _____ SSN: _____ -- --

STATEMENT BY APPLICANT:

I HEREBY CERTIFY THAT ALL STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I RECOGNIZE THAT ANY MISINFORMATION OR OMISSION OF PERTINENT MATERIAL FACTS MAY BE CAUSE FOR DENIAL OF A LICENSE OR FOR SUSPENSION OR REVOCATION OF THIS LICENSE.

DATE

SIGNATURE OF APPLICANT

State of _____

County of _____

Given under my hand this _____ day
of _____ 19 _____.

Signature of Notary Public

My commission expires on: _____

(SEAL)

NAME: _____ SSN: _____ -- --

SUPERVISORS NAME: _____

SUPERVISORS WEST VIRGINIA LICENSE NUMBER: _____

LOCATION OF SERVICES PROVIDED BY ASSISTANT: _____

DESCRIPTION OF DUTIES PROVIDED BY ASSISTANT: _____

DESCRIPTION OF SUPERVISION PROVIDED BY LICENSED SPEECH-LANGUAGE
PATHOLOGIST OR AUDIOLOGIST: _____

NAME: _____ SSN: _____ -- --

A. List all academic degrees held:

COLLEGE/UNIVERSITY	MAJOR (AS STATED ON TRANSCRIPT)	DEGREE	DATE GRADUATED

B. Yes No Have you ever had ANY license request denied or ANY held license revoked or suspended ?

C. Yes No Have you ever been convicted or plead guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside ?

D. Yes No Have you ever been found guilty of unethical practices in the conduct of ANY business or profession ?

E. Yes No Are you presently being treated for any serious contagious disease, mental incompetency or addiction to a controlled substance, narcotic or alcohol which is likely to endanger the health, welfare or safety of the public ?

If Yes, to any answer B through E, please provide detailed information on separate sheet.

The Board holds the right to request additional information, so deemed necessary, from any applicant, for review.

Any future correspondence with the Board shall bear the Applicant's full name and social security number as it appears on the original application.

The Applicant is held responsible in the notification of the Board, of changes in the Applicant's name or address. Such changes to be submitted within 30 days of that change.

THE BOARD SHALL HOLD IN STRICTEST CONFIDENCE ALL INFORMATION HEREIN SUBMITTED BY THIS APPLICATION.

NAME: _____ SSN: _____ -- --

STATEMENT BY APPLICANT:

I HEREBY CERTIFY THAT ALL STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I RECOGNIZE THAT ANY MISINFORMATION OR OMISSION OF PERTINENT MATERIAL FACTS MAY BE CAUSE FOR DENIAL OF A LICENSE OR FOR SUSPENSION OR REVOCATION OF THIS LICENSE.

DATE SIGNATURE OF APPLICANT

State of _____

County of _____

Given under my hand this _____ day of _____ 19 _____.

Signature of Notary Public

My commission expires on: _____

(SEAL)

APPENDIX FIVE
CONTINUING EDUCATION

A minimum of ten clock hours of continuing education must be obtained during every two year licensure period.

Continuing education hours may only be obtained and counted if obtained during the two year licensure period except for the initial licensures which were granted from October 1, 1992 to December 31, 1994.

The Board will accept credits issued by the following organizations:

- The American Speech-Language-Hearing Association
- The West Virginia Speech-Language-Hearing Association
- The West Virginia Hearing Society
- The National Institute for Hearing Instrument Studies
- The American Academy of Audiology

Verification of continuing education credits earned from the above organizations will be required to be submitted with the licensure renewal application. Renewal applications will be mailed to all licensees during the fourth (4th) quarter of the year the license shall expire. Continuing Education activities from other organizations must directly relate to the professional growth and development of Speech-Language Pathologists and Audiologists, and require prior approval of the Board of Examiners for credit. Instructions for requesting credit in this category can be found under Part II of the Continuing Education Credit Request form. You will be required to provide proof of attendance at all activities for which you request credit.

NAME: _____ WV LICENSE #: _____

CONTINUING EDUCATION CREDIT REQUEST

PART I: Continuing Education activities approved by the American Speech-Language-Hearing Association, West Virginia Speech-Language-Hearing Association, The West Virginia Hearing Society (Formerly the West Virginia Hearing Aid Society), The American Academy of Audiology, or The National Institute for Hearing Instrument Studies.

Instructions: Please fill in the information requested below for each continuing education activity for which you are requesting credit. Please continue on the back of this page if additional space is needed. Verification of attendance must be attached or license will not be renewed.

ACTIVITY TITLE: _____
NAME OF INSTRUCTOR/ PRESENTER: _____
APPROVED SPONSOR: _____
DATE OF ACTIVITY: _____ CREDIT HOURS EARNED: _____

ACTIVITY TITLE: _____
NAME OF INSTRUCTOR/ PRESENTER: _____
APPROVED SPONSOR: _____
DATE OF ACTIVITY: _____ CREDIT HOURS EARNED: _____

ACTIVITY TITLE: _____
NAME OF INSTRUCTOR/ PRESENTER: _____
APPROVED SPONSOR: _____
DATE OF ACTIVITY: _____ CREDIT HOURS EARNED: _____

PART II: Continuing Education activities which have not been previously approved by those organizations listed under Part I (i.e., In-house workshops which are directly related to your profession.)

Instructions: On a separate sheet of paper, please provide the following information for each activity for which you are requesting continuing education credit in this category. Attach a brochure (if available), and any other materials that you may consider to be helpful in the justification of the activity.

-
1. Name of activity
 2. Name and credentials of Speaker/Presenter
 3. Date and Hours of Activity (include agenda)
 4. Location and Sponsoring Agency
 5. Contact person/coordinator of activity and telephone number
 6. Goals of the Activity
 7. Methods and materials used in presentation
 8. Target group for activity
 9. Total continuing education credit hours requested for activity.

APPENDIX SIX

WEST VIRGINIA BOARD OF EXAMINERS FOR SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY CODE OF ETHICS AS ADOPTED FROM THE AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

Preamble

The preservation of the highest standards of integrity and ethical principles is vital to the successful discharge of the professional responsibilities of all speech-language pathologists and audiologists. This Code of Ethics has been promulgated by the American Speech-Language-Hearing Association in an effort to stress the fundamental rules considered essential to this basic purpose. Any action that is in violation of the spirit and purpose of this Code shall be considered unethical. Failure to specify any particular responsibility or practice in this Code of Ethics should not be construed as denial of the existence of other responsibilities or practices.

The fundamental rules of ethical conduct are described in three categories: Principles of Ethics, Ethical Proscriptions, Matters of Professional Propriety.

1. Principles of Ethics. Five Principles serve as a basis for the ethical evaluation of professional conduct and form the underlying moral basis for the Code of Ethics. Individuals¹ subscribing to this Code shall observe these principles as affirmative obligations under all conditions of professional activity.

1. "Individuals" refers to all licensed speech-language pathologists and audiologists in the State of West Virginia.

2. **Ethical Proscriptions.** Ethical Proscriptions are formal statements of prohibitions that are derived from the Principles of Ethics.

3. **Matters of Professional Propriety.** Matters of Professional Propriety represent guidelines of conduct designed to promote the public interest and thereby better inform the public and particularly the persons in need of speech-language pathology and audiology services as to the availability and rules regarding the delivery of those services.

Principle of Ethics I

Individuals shall hold paramount the welfare of persons served professionally.

A. Individuals shall use every resource available, including referral to other specialists as needed, to provide the best service possible.

B. Individuals shall fully inform persons served of the nature and possible effects of these services.

C. Individuals shall fully inform subjects participating in research or teaching activities of the nature and possible effects of these activities.

D. Individuals' fees shall be commensurate with services rendered.

E. Individuals shall provide appropriate access to records of persons served

professionally.

F. Individuals shall take all reasonable precautions to avoid injuring persons in the delivery of professional services.

G. Individuals shall evaluate services rendered and products dispensed to determine effectiveness.

Ethical Proscriptions

1. Individuals must not exploit persons in the delivery of professional services, including accepting persons for treatment when benefit cannot reasonably be expected or continuing treatment unnecessarily.

2. Individuals must not guarantee the results of any therapeutic procedures, directly or by implication. A reasonable statement of prognosis may be made, but caution must be exercised not to mislead persons served professionally to expect results that cannot be predicted from sound evidence.

3. Individuals must not use persons for teaching or research in a manner that constitutes invasion of privacy or fails to afford informed free choice to participate.

4. Individuals must not evaluate or treat speech, language or hearing disorders except in a professional relationship. They must not evaluate or treat solely by correspondence. This does not preclude follow-up correspondence with persons previously seen, nor providing them with general information of an educational nature.

5. Individuals must not reveal to unauthorized persons any professional or person information obtained from the person served professionally, unless required by law or unless necessary to protect the welfare of the person or the community.
6. Individuals must not discriminate in the delivery of professional services on any basis that is unjustifiable or irrelevant to the need for and potential benefit from such services, such as race, age, religion, national origin, sexual orientation, or handicapping condition.
7. Individuals must not charge for services not rendered.

Principle of Ethics II

Individuals shall maintain high standards of professional competence.

- A. Individuals engaging in clinical practice of supervision thereof shall hold the appropriate Certificate(s) of Clinical Competence for the area(s) in which they are providing or supervising professional services.
- B. Individuals shall continue their professional development throughout their careers.
- C. Individuals shall identify competent, dependable referral sources for persons served professionally.
- D. Individuals shall maintain adequate records of professional services rendered.

Ethical Proscriptions

1. Individuals must neither provide services nor supervision of services for which they have not been properly prepared, nor permit services to be provided by any of their staff who are not properly prepared.
2. Individuals must not provide clinical services by prescription of anyone who does not hold the Certificate of Clinical Competence.
3. Individuals must not delegate any service requiring the professional competence of a certified clinician to anyone unqualified.
4. Individuals must not offer clinical services by supportive personnel for whom they do not provide appropriate supervision and assume full responsibility.
5. Individuals must not require anyone under their supervision to engage in any practice that is a violation of the Code of Ethics.

Principle of Ethics III

Individuals' statements to persons served professionally and to the public shall provide accurate information about the nature and management of communicative disorders, and about the professional services rendered by its practitioners.

Ethical Proscriptions

1. Individuals must not misrepresent their training or competence.

2. Individuals' public statements providing information about professional services and products must not contain representations of claims that are false, deceptive or misleading.

3. Individuals must not use professional or commercial affiliations in any way that would mislead or limit services to persons served professionally.

Matters of Professional Propriety

1. Individuals should announce services in a manner consonant with highest professional standards in the community.

Principle of Ethics IV

Individuals shall honor their responsibilities to the public, their profession, and their relationships with colleagues and members of allied professions.

Ethical Proscriptions

1. Individuals must not participate in activities that constitute a conflict of professional interest.

Matters of Professional Propriety

1. Individuals should seek to provide and expand services to persons with speech, language and hearing handicaps as well as to assist in establishing high professional standards for such programs.

2. Individuals should educate the public about speech, language and hearing processes, speech, language and hearing problems, and matters related to professional competence.
3. Individuals should strive to increase knowledge within the profession and share research with colleagues.
4. Individuals should establish harmonious relations with colleagues and members to other professions, and endeavor to inform members of related professions of services provided by speech-language pathologists and audiologists, as well as information from them.
5. Individuals should assign credit to those who have contributed to a publication in proportion to their contribution.
6. Individuals should not accept compensation for supervision or sponsorship from the clinical fellow being supervised or sponsored beyond reasonable reimbursement for direct expenses.
7. Individuals should present products they have developed to their colleagues in a manner consonant with highest professional standards.

Principle of Ethics V

Individuals shall uphold the dignity of the profession and freely accept the profession's self-imposed standards.

A. Individuals shall inform the Ethical Practice Board when they have reason to believe that a member or certificate holder may have violated the Code of Ethics.

B. Individuals shall cooperate fully with the Ethical Practice Board concerning matters of professional conduct related to this Code of Ethics.

Ethical Proscriptions

1. Individuals shall not engage in violations of the Principles of Ethics or in any attempt to circumvent any of them.

2. Individuals shall not engage in dishonesty, fraud, deceit, misrepresentation, or other forms of illegal conduct that adversely reflect on the profession or the individuals' fitness for membership in the profession.

APPENDIX SEVEN
COURSEWORK REQUIREMENT FOR MASTER'S EQUIVALENCY

OUTLINE OF THE ACADEMIC COURSES AND PRACTICUM REQUIRED FOR THE
CERTIFICATES OF CLINICAL COMPETENCE IN SPEECH-LANGUAGE PATHOLOGY
(SLP) AND AUDIOLOGY (A) FOR THE BASIS OF MASTER'S DEGREE
EQUIVALENCY

I. COURSEWORK: Minimum 60 semester hours (s.h.) must be at the graduate level.

A. BASIC COMMUNICATION PROCESSES COURSEWORK:

SLP and A APPLICANTS: 12 semester hours minimum required

- * At least 2 s.h. in anatomic & physiological bases for normal development and use of speech, language and hearing.
- * At least 2 s.h. in physical bases and processes of the production and perception of speech, language and hearing.
- * At least 2 s.h. in linguistic and psycholinguistic variables related to normal development and use of speech, language and hearing.

B. PROFESSIONAL AREA SPEECH-LANGUAGE PATHOLOGY/AUDIOLOGY
COURSEWORK:

30 semester hours minimum required; 21 s.h. must be graduate level. If seeking certification in both speech and audiology, at least 15 graduate level semester hours in each area are required.

1. CCC-SLP applicants

a. Speech and language disorders: minimum 24 s.h. required

*at least 6 s.h. in speech disorders

*at least 6 s.h. in language disorders

b. Audiology: minimum 6 s.h. required

*at least 3 s.h. in auditory pathology

*at least 3 s.h. in habilitation/rehabilitation

2. CCC-A applicants

a. Audiology: minimum 24 s.h. required

*at least 6 s.h. in auditory pathology

*at least 6 s.h. in habilitation/rehabilitation

b. Speech and language disorders: minimum 6 s.h. required

*at least 3 s.h. in speech disorders

*at least 3 s.h. in language disorders

C. Related area coursework: SLP and A applicants: no minimum hours required.

Note: Academic credit for practicum cannot be used to satisfy these minimum requirements, although 6 s.h. of practicum can be counted in the 60 s.h. overall coursework minimum total.