

TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157 www.tdlr.texas.gov

BEHAVIOR ANALYST / ASSISTANT BEHAVIOR ANALYST LICENSE APPLICATION INSTRUCTIONS

- 1. NAME Provide your legal name in the spaces provided. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
- GENDER Select whether you are male or female.
- 3. <u>DATE OF BIRTH</u> Provide your birthdate.
- 4. <u>SOCIAL SECURITY NUMBER</u> Social Security Number disclosure is required by Section 231.302(c)(1) of the Texas Family Code in order to obtain a license. Your Social Security Number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the *Texas Attorney General*.
- 5. <u>EMAIL ADDRESS</u> Provide your email address. By providing my email address I authorize TDLR to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address, or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law. (Required)
- 6. <u>PERSONAL PHONE NUMBER</u> Provide a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
- MAILING ADDRESS Provide your current mailing address. This is the address where we will send you mail. This
 address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently
 and accurately.
- 8. <u>TYPE OF LICENSE FOR WHICH YOU ARE APPLYING</u> Please place a check mark in the box next to the type of license for which you are applying.
- CERTIFICATION Please select the certification you hold and enter your certification number and expiration date.
- 10. <u>CRIMINAL HISTORY</u> Indicate if you have ever been convicted of, or placed on deferred adjudication for, any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a <u>Criminal History</u> <u>Questionnaire (PDF)</u> for each offense. If you are worried your criminal history could prevent you from getting this license, Texas allows you to have your criminal history evaluated before submitting your application and non-refundable fees. To request a criminal history evaluation, submit a <u>Criminal History Evaluation Letter</u>, a completed Criminal History Questionnaire form for each crime you were convicted of, or placed on deferred adjudication for, and a \$10.00 fee. You can find more information on the process and download the necessary forms on the <u>TDLR</u> <u>website</u>.
- 11. <u>DISCIPLINARY ACTION HISTORY</u> Indicate if you have ever had an occupational license, certification, or Registration suspended, revoked, or denied in any state. If you have, complete and attach a <u>Disciplinary Action</u> <u>Questionnaire (PDF)</u> for each disciplinary action.
- 12. <u>STATEMENT OF APPLICANT</u> Carefully read the statement before signing and dating your application. The law and rules you must comply with are on TDLR's Behavior Analysts web page.

APPLICATION INFORMATION FOR MILITARY SERVICE MEMBERS, MILITARY VETERANS AND MILITARY SPOUSES:

The Texas Department of Licensing and Regulation recognizes the contributions of our active duty military service members, their spouses, and veterans. If you want to use one of the licensing options available to military service members, military veterans and military spouses, please complete the <u>Military Service Member, Military Veteran or Military Spouse Supplemental Application (PDF)</u> and attach it with your license application. If you have additional questions about qualifications, training or experience requirements relating to occupation licensing for military service members, military veterans or military spouses, please visit the <u>TDLR Military Information webpage</u>

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

TDLR P.O. Box 12157 Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, please visit the <u>TDLR website</u> or reach Customer Service via <u>webform</u>. The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202 (in state only), (512) 463-6599, or Relay Texas-TDD: (800) 735-2989.

TDLR Public Information Act Policy:

This document is subject to the Texas Public Information Act. With certain exceptions, information in this document may be made available to the public. For more information, view the *TDLR Public Information Act Policy*.



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BEHAVIOR ANALYST / ASSISTANT BEHAVIOR ANALYST LICENSE APPLICATION

Behavior Analyst License Fee: \$165 (Fee is non-refundable)

Assistant Behavior Analyst License Fee: \$110 (Fee is non-refundable)					
This completed form must be accompar	nied by any requ	ired documents and the ap	plication f	<u>ee</u>	
1. Name:			[2	2. Gend	ler:
Loss	Finak	NA: alalla	Cuttin	М	F
Last 3. Date of Birth:	First 4. Social Securi	Middle ty Number:	Suffix		
		•			
MM/DD/YYYY	See instruction sheet for disclosure information				
5. Email Address:		6. Personal Phone Number:			
(For inheritan Carles and Operations about the Displacement					
(Ex: johndoe@aol.com) See Instructions sheet for Disclosure		(Area Code) Phone Number			
7. Mailing Address:					
	211		-		
(P.O. Box, Number, Street Name/Apartment Number)	City	State	Zip Cod	de + 4	
8. Type of license for which you are applying: (Please check the box next to the type of license for which you are applying)					
Behavior Analyst Assistant Behavior Analyst					
9. Certification: (Please select the certification you ho	old and enter the	certification number and expira	ation date)		
I am a Board Certified Behavior Analyst or a Board Certified Behavior Analyst-Doctoral certified by the Behavior Analyst Certification Board (BACB®).					
I am a Qualified Behavior Analyst certified by the Qualified Applied Behavior Analysis Credentialing Board (QABA®)					
I am a Board Certified Assistant Behavior Analyst certified by the BACB®.					
I am a Qualified Autism Service Practitioner-Supervisor (QASP-S®) certified by the QABA®.					
Certification number:		Expiration Date:			
10. Have you ever been convicted of, or placed on de	ferred adjudication	n for, any			
misdemeanor or felony, other than a minor traffic violation?				'es	No
If YES, complete and submit a Criminal History questionnaire (CHQ) for each offense. See instructions sheet for more information					
11. Have you ever had a professional or occupational		tion, registration or	V	' 00	Na
permit suspended, revoked or denied in any state If YES, complete and submit a Disciplinary Action Question (This does)			Y	'es	No
	ENT OF APPLIC				
I certify that I have read and will comply with all applicable provisions of the Behavior Analyst Licensing Act and the TDLR law in Texas Occupations Code, Chapter 506 and Chapter 51; and the Behavior Analyst Administrative Rules and the TDLR universal rules at 16 Texas Administrative Code, Chapter 78 and Chapter 60. I understand that providing false information on this application may result in denial of this application and/or revocation of the license I am requesting, and the imposition of administrative penalties.					
Signature	Date				