IDAHO SPEECH, HEARING AND COMMUNICATION SERVICES LICENSURE BOARD
Idaho Bureau of Occupational Licenses
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Boise, Idaho 83720-0063
Phone: (208) 334-3233 Fax: (208) 334-3945
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APPLICATION FOR HEARING AID DEALER AND FITTER SUPERVISOR REGISTRATION

(There is no fee for registering as a supervisor with the Board)

Each supervisor applicant must complete the following affidavit before providing supervision. A supervisor shall not have been the subject of any disciplinary action for two (2) years immediately prior to providing supervision. Further, in accordance with Licensure Rule 450, each supervisor applicant must comply with the following requirements of providing supervision:

- Hold either an Idaho hearing aid dealer and fitter license or an Idaho audiologist license that is current and in good standing and is renewed as provided in the Board's rules;
  - A supervisor that is an audiologist must have actively practiced audiology for at least one (1) year immediately prior to being approved as a supervisor
  - A Supervisor that is a hearing aid dealer and fitter must (please check the method by which you are applying):
    ____Holds a current board certificate in hearing instrument sciences. Provide a copy of a current board certificate in hearing instrument sciences (BC-HIS) from the National Board for Certification in Hearing Instrument Sciences; **OR**
    ____Has been actively practicing as a hearing aid dealer and fitter for at least three (3) years immediately prior to being approved as a supervisor (please provide proof of licensure).

  AND
- Be approved in advance by the Board for each permit holder;
- Not have been the subject of any disciplinary action by the Board or by any other jurisdiction for two (2) years immediately prior to being approved as a supervisor;
- Not supervise more than two (2) permit holders at a time;
- Have an established business site within the state of Idaho that the supervisor regularly utilizes as a base of operation. The supervisor and the permit holder shall be required to work within the same facility;
- Provide the permit holder with adequate training and client contact necessary to prepare for the required examination; AND
- Record with the Board a plan of training that encompasses all sections covered in the license examination. The plan must be accepted and approved by the Board or its agent prior to issuance of the permit. The supervisor shall document, by the quarterly report, the permit holder's progress.

AFFIDAVIT

I hereby certify under penalty of perjury that I hold a current and unrestricted license in hearing aid dealing and fitting or audiology and that I have not been the subject of any disciplinary action by any regulatory body within the two (2) years immediately preceding this application. I further certify that I have met the supervisor experience and education requirements required by Idaho's Laws and Rules, and that I have read and will comply with the Idaho's laws and rules governing the supervision of hearing aid dealer and fitter permit holders and that I will not register to provide supervision to more than two (2) individuals at any one time. I agree to provide documentation of my supervisory qualifications, as well as documentation of my supervision of individuals, to the Idaho Board as they may request.

_____ _____ _____
Applicant Name (please print) License # Business Phone #

_____
Signature of Applicant

State of _____, County of _____, ss.
Subscribed and sworn before me this _____ day of _____, 20 _____.

_____
(seal) Notary Public Official Signature
My Commission Expires_____

Please note that the relationship of a permit holder and their supervisor is public information. Anyone can request the information using a public records request. Further, approved supervisors are listed on the Bureau's website and may be identified with their provisional permit holders.