Alabama Behavior Analyst Licensing Board
Application for Licensure

Type or block print only.

1. License Type
Select the type of license for which you are applying.

- ☐ Licensed Behavior Analyst
- ☐ *Renewal*: Licensed Behavior Analyst
- ☐ *Temporary*: Licensed Behavior Analyst
- ☐ *Reciprocity*: Licensed Behavior Analyst
- ☐ Licensed Assistant Behavior Analyst
- ☐ *Renewal*: Licensed Assistant Behavior Analyst
- ☐ *Temporary*: Licensed Assistant Behavior Analyst
- ☐ *Reciprocity*: Licensed Assistant Behavior Analyst

2. Name(s)

This is the name that will be printed on your license and reported to those who inquire about your license. Do not use nicknames, etc.

Note: It is your responsibility to notify the Board of name changes.

_____
First Name

_____
Middle Name

_____
Last Name

_____
Suffix (i.e., Jr. Sr., II)

_____
Maiden Name, if applicable

_____
Name(s) under which originally licensed in another state, if different from above (First, Middle, Last).

3. Social Security Number

_____
U.S. Social Security Number

4. Gender

☐ Female   ☐ Male

5. Date of Birth

_____ _____ _____
MM   DD   YYYY

6. Contact Information

Note: It is your responsibility to notify the Board of any changes.

_____
Address

_____
Address 2, if applicable

_____   _____   _____
City   State   Zip Code

_____   _____
Phone Number   Email Address

7. Mailing Address
☐ Same as above

_____
Address

_____
Address 2, if applicable

_____   _____   _____
City   State   Zip Code

Alabama Behavior Analyst Licensing Board │ P.O. Box 168 Mathews, AL 36052 │ (334) 242-0477 │ balicense.dmh@mh.alabama.gov

8. BACB Certification	_____ _____ BACB Certificant Number BACB Certification Held
9. Other State License(s) Note: Submit a License Verification Form for each state listed.	Have you ever held a license in another state? ☐ No ☐ Yes, provide details below List all states* in which you are now, or have ever been, licensed to practice behavior analysis. State: State: _____ ☐ Active ☐ Inactive _____ ☐ Active ☐ Inactive _____ ☐ Active ☐ Inactive _____ ☐ Active ☐ Inactive * Use a separate sheet of paper to list additional state licenses, if necessary.
10. Qualifying Education Provide information about the school(s) you attended that qualifies you for licensure. Use a separate sheet of paper to list additional schools, if necessary.	_____ _____ ____ University/College City State _____ _____ Department Degree earned Graduation date (MM/YY): _____ BACB coursework completed here? ☐ No ☐ Yes _____ _____ ____ Second University/College, if applicable City State _____ _____ Department Degree earned Graduation date (MM/YY): _____ BACB coursework completed here? ☐ No ☐ Yes
11. Criminal Convictions	Have you ever been convicted of a criminal violation, plead Nolo Contendere, or entered a plea bargain to any federal, state, or local statute, or are any formal charges pending? ☐ No ☐ Yes, attach details on a separate sheet of paper
12. Disciplinary Actions *Use a separate sheet of paper to list additional disciplinary actions, if necessary.	A. Has any health professional license, certificate, registration, or permit you hold or have held been disciplined or are any formal charges pending? ☐ No ☐ Yes, provide details below* B. Have you ever been denied a license, certificate, registration, or permit in any state? ☐ No ☐ Yes, provide details below* Date Location Explanation of the matter _____ _____ _____ _____
13. Criminal Background Check* *First-time applicants ONLY. Not required for renewals.	Submit the following directly to the ALEA Criminal Records & Identification Unit: ☐ ALEA Application to Review Alabama Criminal History Record Information ☐ A copy of a valid photo identification, see instructions list for options ☐ Fingerprints on FBI Applicant cards, see instructions for detailed requirements ****Make copies of the above documents to include in your Application for Licensure**** ☐ $25.00 money order or cashier's check payable to "ALEA Criminal Records and Identification Unit"
14. Other Required Forms & Fees	**All applicants:** ☐ $25 Application Review Fee (see Application Instructions for important info regarding payments) ☐ Applicable Licensure Fee (see list of fees below on p. 3) ☐ If applicable, License Verification Form(s) for question #9 ☐ If applicable, separate sheets required to answer questions #9-12 **In addition, for first-time applicants ONLY:** ☐ Copies of ALEA application, ID, and fingerprint card **In addition, for applicants for "assistant" licenses ONLY:** ☐ Proof of Supervision Form

15. Applicant Affidavit Must be signed in the presence of a notary.	I, _____, understand that the Board has the final decision and authority with reference to this application. I also understand that any false or misleading information in connection with this application may be cause for rejection of the application, revocation of the license, and/or legal action for such fraudulent information. State of Alabama _____ County The undersigned swears/affirms that he/she is the person who executed this application; that the statements contained herein are true in every respect; that he/she has not suppressed any information that might affect this application; that he/she will conform to the professional and ethical compliance code for behavior analysts; and that he/she has read and understands this affidavit. _____ _____ Applicant's Signature Date signed Sworn before me this _____ day of _____, 20_____. _____ _____ Notary's Signature My Commission Expires

Application Checklists:

To be sent to AL Behavior Analyst Licensing Board, P.O. Box 168, Mathews, AL 36052:

☐ Completed, notarized ALBALB Application for Licensure

☐ $25 Application Review fee and Licensure fee on separate checks or money orders made payable to "Alabama Behavior Analyst Licensing Board" (see Application Instructions for important info regarding payments):

☐ Licensed Behavior Analyst…………………………$150
☐ Renewal Licensed Behavior Analyst………………..$150
☐ Temporary Licensed Behavior Analyst……………..$100
☐ Reciprocity: Licensed Behavior Analyst……………$150
-- Assistant options:
☐ Licensed Assistant Behavior Analyst………………..$100
☐ Renewal Licensed Assistant Behavior Analyst……..$100
☐ Temporary Licensed Assistant Behavior Analyst…..$100
☐ Reciprocity: Licensed Assistant Behavior Analyst…$100
-- Other options:
☐ Late Fee…..……………………………………….$50
☐ Licensure reinstatement fee…………………………$100
☐ Fee for duplicate copy of license or certificate…..….$15

☐ If applicable, separate 8½ x 11 pages to complete answers to questions #9 through #12
☐ For assistant-level applicants ONLY: Proof of Supervision Form
☐ For first-time applicants ONLY: *Copies* of ALEA application, ID, and fingerprint card

For applicants licensed in another state, to be sent to the licensing board in the applicable states:

☐ License Verification Form(s) (the licensing board in the applicable states will mail our Board the completed verification)

To be sent to ALEA Criminal Records & Identification Unit, Attn: Background Checks, P.O. Box 1511, Montgomery, AL 36102-1511:

☐ ALEA Application to Review Alabama Criminal History Record Information
☐ One copy of a valid photo identification, see instructions list for options
☐ Set of fingerprints, see instructions for detailed requirements
☐ $25.00 money order or cashier's check payable to "ALEA Criminal Records and Identification Unit"