



STATE COMMITTEE OF EXAMINERS IN THE FITTING AND DISPENSING OF HEARING INSTRUMENTS

Mail Code: MC 2003 • PO Box 149347 • Austin, Texas 78714-9347
Phone: (512) 834-6784 • Fax: (512) 834-6677
E-mail: fdhi@dshs.state.tx.us
Website: www.dshs.state.tx.us/fitters/

APPLICATION FORM
TEMPORARY TRAINING PERMIT

Effective May 1, 2012, all new applicants will be required to submit fingerprints to the Texas Department of Public Safety (DPS). Go to <http://www.dshs.state.tx.us/fitters/> and select the DPS/FBI Fingerprinting tab.

All applicants must submit this Application Form. All questions must be answered. Be sure to read the committee rules to determine what documents are required. Application processing begins after all required documentation is received and accepted by the committee.

Applicant's Full Legal Name: (First, Middle, Last)	
Name(s) on Transcript(s) if different:	
Date of Birth:	Social Security #:
Mailing Address:	
City/State/Zip:	
Home Phone Number:	
E-mail Address:	

Please note: The committee office is not responsible for lost, misdirected or undelivered forms and fees. The committee will mail all documents to the address you provide above. (Be sure to include the zip code.)

Be sure to notify your employer that you will be unable to practice while you wait for your temporary training permit.

Texas Occupations Code, § 402.201. LICENSE OR PERMIT REQUIRED. A person may not represent that the person is authorized to fit and dispense hearing instruments, or use in connection with the person's name any designation tending to imply that the person is authorized to engage in the fitting and dispensing of hearing instruments, unless the person holds a license or is otherwise authorized to do so under this chapter.

Prior to completing this form, you must read the law (Texas Occupations Code, Chapter 402) and the committee rules, Chapter 141. Do not complete the applicant's affidavit if you have not read the committee law and rules.

FEES: \$215.00 - The fee must be mailed with the application. Do not send cash. Fees are nonrefundable. Make Checks Payable To DSHS/Fitting & Dispensing Of Hearing Instruments Program.

MAIL TO:

STATE COMMITTEE OF EXAMINERS IN THE FITTING AND DISPENSING OF HEARING INSTRUMENTS
TEXAS DEPARTMENT OF STATE HEALTH SERVICES
MAIL CODE: MC2003
PO BOX 149347
AUSTIN, TX 78714-9347

LICENSURE PROCESS:

1. Apply and obtain a Temporary Training Permit. Issued for one year.
2. Complete 160-hours of direct supervised practicum
3. Take and pass the Written and Practical Examinations which are given three times a year (dates are posted on the committee's website), Examination Eligibility Packets are mailed 60-days prior to the examination date.
4. Apprentice Applications are mailed with the Examination Results for applicants that have satisfactory completed the examination.
5. Apply, obtain and complete the one year Apprenticeship.
6. 60-days prior the expiration of your apprentice permit an upgrade to full licensure application will be mailed.

DOCUMENTATION THAT MUST ACCOMPANY YOUR APPLICATION:

Applications will not be processed until all required documents are received. To expedite your application, collect all documents and send them with your application. Having documents sent separately can significantly delay the processing of an application.

- Application and the \$215.00 fee
- Supervisor's Affidavit (included with this application)
- Official diploma or official transcript indicating graduation from high school (a photocopy which has been notarized as a true and exact copy can be submitted) or certificate of high school equivalency issued by the appropriate education agency or an official transcript(s) from an accredited college or university indicating a college degree was awarded.

CURRENT EMPLOYMENT INFORMATION:

Name of Employer/Practice:
Business Mailing Address:
City/State/Zip:
Business Phone Number:
Business Fax Number:

EDUCATION RECORDS (List all high school/GED/colleges/universities attended and attach additional pages if necessary)
Please provide an official or notarized photocopy of education records.

Name & Location of School	Inclusive Dates		Degree Granted (field of study)	Date Degree Granted (mm/dd/yy)
	From (mm/yy)	To (mm/yy)		

ADDITIONAL QUESTIONS:

1. (a) Have you ever taken a written examination to fit and dispense hearing instruments? Yes No

If yes, give name of test, date taken and score(s):

(b) Give State(s) from which you completed the written examination in:

2. (a) Have you ever taken a practical examination to fit and dispense hearing instruments? Yes No

If yes, give date taken and scores: _____

(b) Give State(s) from which you completed the practical examination in:

3. Have you ever been issued a temporary training permit? Yes No

If yes, give State(s) from which the permit was issued, permit number and date issued: _____

4. Have you ever been issued an apprentice permit? Yes No

If yes, give State(s) from which the permit was issued, permit number, date issued and how long the apprenticeship was: _____

5. Have you been denied a professional license and/or certificate, or have you ever had any license and/or certificate revoked, canceled, or suspended? Yes No

If answer is yes, briefly state the type of license or certificate, the name and address of the agency that issued the license or certificate and the reason:

6. Have disciplinary proceedings been initiated against you in Texas or any other jurisdiction?

Yes No

If answer is yes, please provide the following information:

Date of proceedings:

Where proceedings held:

7. Have you ever pled nolo contendere, received deferred adjudication or been convicted of crime other than a minor traffic offense? (Do not include juvenile offenses or any misdemeanor traffic violations. Driving while intoxicated (DWI) is not a minor traffic offense) Yes No

If yes, please provide a copy if the charges and disposition papers.

APPLICANT'S AFFIDAVIT
PLEASE READ VERY CAREFULLY BEFORE YOU SIGN

In making this application to the State Committee of Examiners in the Fitting and Dispensing of Hearing Instruments for the issuance of a license,

- I certify that I have read and agree to abide by the Fitting and Dispensing of Hearing Instruments Act – Texas Occupations Code, Chapter 402, and the rules and regulations of the State Committee of Examiners in the Fitting and Dispensing of Hearing Instruments – Texas Administrative Code, Chapter 141. Upon issuance of a permit or license, I agree to be bound by the Code of Ethics of the State Committee of Examiners in the Fitting and Dispensing of Hearing Instruments.
- I further understand that the fee submitted with this application is non-refundable.
- I further understand that materials submitted to the committee become the property of the committee and are not returnable.
- I hereby grant permission to the committee to seek any information or references it deems fit in securing my credentials pertinent to this application.
- I further agree that if issued a temporary permit, apprentice permit or license, upon the revocation, suspension, or cancellation of that permit/license, I shall return the permit/license card and certificate to the committee.
- I further agree that if issued a license, I will keep the Committee advised of my current mailing address.
- The information which I have provided in this application is truthful.
- I understand that providing false information of any kind may result in the voiding of this application and my failing to be granted a permit.

(Date)

Signature of Applicant

SUPERVISOR'S AFFIDAVIT

The practicum experience of temporary training permit holders must be done under the direct supervision of an individual who holds a valid license, from the committee, to fit and dispense hearing instruments in the state of Texas. Direct supervision means the physical presence of a supervisor anytime a temporary permit holder is engaged in the act of fitting and dispensing hearing instruments.

The application for a temporary training permit shall be accompanied by the affidavit of a person duly licensed and qualified to fit and dispense hearing instruments in the State of Texas. The accompanying affidavit shall state that the applicant, if granted a temporary training permit, will be directly supervised by the affiant in all work done by the applicant under such temporary training permit, the affiant will notify the committee within ten days following the applicant's terminating of supervision by affiant.

- It shall be the responsibility of each holder of a temporary training permit under this Act to be familiar with and to avoid commission of any acts regarded as unethical practices by the Act. Full responsibility for the ethical conduct of a temporary permit holder shall rest with the license holder who has agreed to be the permit holder's supervisor; provided, however, that such supervisor may relieve him/herself of such responsibility by discharging the holder of the temporary training permit, together with a letter explaining fully the circumstances under which the temporary training permit holder was separated from supervision.
- I further understand that if the temporary permit holder fails the examination, the temporary training permit holder must repeat the hours of direct supervision required for the section(s) that were failed.
- I do hereby affirm that I am the holder of a valid, unrevoked, unsuspended license under Texas Occupations Code, Chapter 402 or Texas Occupations Code, Chapter 401.311 or 401.312, and that I have read the above and that I fully understand my responsibilities as supervisor of the temporary permit holder who will work and train under my direct supervision and for whose technical training and ethical conduct I am to be responsible.
- I further affirm that I have read the application of the above named person and that to the best of my knowledge all information is true and correct.

Applicant's Name _____

Supervisor's Name (printed): _____ License #: _____

Business Name: _____

Business Address: _____

Business City, State, and Zip: _____

Business Phone Number: _____

Business Fax Number: _____

Date

Signature of Supervisor