



**OKLAHOMA BOARD OF EXAMINERS FOR SPEECH-LANGUAGE
PATHOLOGY AND AUDIOLOGY**

3700 N Classen Blvd Ste. 248 Oklahoma City, OK. 73118
Oklahoma.gov/OBESPA

**SPEECH-LANGUAGE PATHOLOGY ASSISTANT (SLPA)
ACADEMIC & CLINICAL REQUIREMENT FORM**

Applicant Name: _____

Certifying Accredited Institution: _____

Academic and Clinical Requirement Verification	# of hours completed at this institution
• Technical content courses (minimum 20 hours) Must include:	
○ Foundations of communication and disorders	
○ Anatomy and physiology of speech and hearing	
○ Phonetics	
○ Speech sound development and disorders	
○ Language development and disorders	
○ Cultural and linguistic factors in communication	
○ Assistant-level service delivery practices or instructional methods for the SLPA	
○ Professional standards for the SLPA; must include objectives for scope of practice, ethics, supervision, and professional practices.	
• Observation hours (minimum 25 total hours)	
• Clinical Experience hours (minimum 100 supervised clock hours)	

I certify that the information provided on this form is true and accurate to the best of my knowledge. The credits and hours listed as completed at this institution have been verified through our official records.

Signature of Program Director or Authorized Official

Print Name and Title

Date

Notes:

1. This form must be completed by an authorized official from the certifying academic institution.
2. An additional form is required for each institution where requirements were met.
3. An official transcript from each institution will be required.