Speech-Language Pathology (SLP) Academic Preparation and Practicum Form Verification for Licensure Application

Name of Applicant	
As Program Director of the	Department/Program
of, I verify that the above individual:	
(Name of College/University)	
from an accredited academic institution offering earned required at least 75 semester credit hour. 1) at least 27 credit hours in the basic sciences and mathematics. At least 6 deast 15 credit hours must be in the basic each of the following three areas of spother physical and psychophysical bases including culturally diverse population. 2) at least 36 credit hours in graduate or prevaluation, and treatment of speech, larguage as well as disorders primarily affecting. 3) specific knowledge must be demonstrated fluency; voice and resonance; receptive semantics, and pragmatics) in speaking including impact on speech and language.	professional courses that concern the nature, prevention, inguage, and hearing disorders. Those 36 semester hours must be, and hearing that concern disorders primarily affecting children is adults. In the following areas: articulation; and expressive language (phonology, morphology, syntax, in its grading, writing, and manual modalities; hearing, writing, and manual modalities; hearing, wri
No, this individual has not met the abo	ve academic requirements.
 The individual has completed a minimum of 400 clock hours of supervised clinical practicum, of which at least 375 must be in direct client/patient contact The individual has completed at least 25 clock hours in clinical observation that are provided by the educational institution or by one of its cooperating programs The individual has completed at least 325 clock hours while engaged in graduate study in a program accredited in speech-language pathology by the Council of Academic Accreditation in Audiology and Speech-Language Pathology (CAA). 	
Yes, this individual has met the above No, this individual has not met the above	-
When this individual's degree was granted	, this program was/was not (circle one) accredited by CAA.
Name of Program Director	Program Director Signature Date