

**APPENDIX**  
**APPLICANT INFORMATION SHEET**  
**(AIS)**

**Applicant Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Home Phone Number:** \_\_\_\_\_

**Cell Phone Number:** \_\_\_\_\_

**Work Site or Practicum Site:**  
**Address of Work or Practicum Site:**  
**Work Phone Number:**  
**Position Title:**

**Experience servicing people with disabilities**  
**Locations** \_\_\_\_\_ **Total number of years** \_\_\_\_\_  
**Type of work** \_\_\_\_\_

**Any language beyond English that you speak, and the level of your fluency:**

**Indicate by priority your preferred ABA class location**  
UMass Boston (live site) \_\_\_\_\_  
Other sites involved via live interactive TV:  
Grodin Center (Providence, RI) \_\_\_\_\_  
League School (E. Walpole, MA) \_\_\_\_\_

**Please check off all boxes that apply:**

\_\_\_\_\_ I have attached a current job description to this form and a description of the setting in which I will be applying behavior analytic techniques

\_\_\_\_\_ I currently work in a setting in which I can apply behavior analytic strategies at a minimum of 10 hours per week and a minimum of 40 hours per month

\_\_\_\_\_ I am planning to sit for the certification examination at the completion of the 7-course sequence

\_\_\_\_\_ I am interested in sitting for the examination at a later date. Please explain:

\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_ I currently do not have a certified behavior analyst to serve as my BCBA supervisor and I am interested in obtaining information about supervision opportunities. A BCBA supervisor is required during the program.

\_\_\_\_\_ I currently have a certified behavior analyst to serve as my BCBA supervisor

\_\_\_\_\_ I have received attestation (see below) from my **BCBA supervisor** that I am currently applying behavior analytic strategies at a minimum of 10 hours per week (40 hours per month) or will be by the start of the ABA Graduate Certificate Program.

\_\_\_\_\_ My BCBA supervisor is licensed as a LABA in Massachusetts (if you intend to pursue Mass. licensure).

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### **BCBA SUPERVISOR ATTESTATION**

\_\_\_\_\_ I am a Board Certified Behavior Analyst in good standing with the BACB

\_\_\_\_\_ I understand that you will contact me before the start of each course to provide information about the course content

\_\_\_\_\_ I attest that this applicant is working in a setting where they could be applying behavior analytic strategies at least 10 hours per week (40 hours per month)

\_\_\_\_\_ I attest that I plan to be the applicant's supervisor for the duration of the ABA Graduate Certificate Program, following the guidelines provided by the Behavior Analyst Certification Board (BACB)

\_\_\_\_\_  
Supervisor Name

\_\_\_\_\_  
Supervisor certificate number

\_\_\_\_\_  
Supervisor Address

\_\_\_\_\_  
Supervisor email address

\_\_\_\_\_  
Supervisor phone

\_\_\_\_\_  
Supervisor signature

\_\_\_\_\_  
Date