

# Academy of Neurologic Communication Disorders and Sciences

2345 Rice Street, Suite 220  
St. Paul, Minnesota 55113

## BOARD CERTIFICATION CANDIDATE APPLICATION

Candidate for Board Certification in Neurologic Communication Disorders (BC-NCD) in  
 \_\_\_Adults \_\_\_Children \_\_\_Adults and Children (Dual)

Type of Current ANCDs Membership \_\_\_Full Member \_\_\_None

Please Print or Type

Full Name \_\_\_\_\_ (circle:) MS/MA/PhD/other \_\_\_\_\_  
 (Last) (First) (Middle)

Preferred Address \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_  
 (For Membership Directory) \_\_\_\_\_ Office Phone(\_\_\_\_) \_\_\_\_\_  
 \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
 \_\_\_\_\_ Email \_\_\_\_\_

### I. Educational and Professional Background

1. Education	University	Major	Degree	Year Completed
Undergraduate	_____			
Graduate	_____			
Post-Graduate or Doctoral	_____			
2. Currently hold a license(s) to practice Speech-Language Pathology: ___Yes ___No State _____; License number, if applicable _____				
3. Currently hold a valid Certificate of Clinical Competence (CCC) in Speech-Language Pathology from the American Speech-Language-Hearing Association: ___Yes ___No Date awarded _____; Account number _____				
4. Professional employment in the past 5 years				
Title	Employer/Location		Dates (from/to)	
_____				
_____				
_____				
5. Has your ASHA certification and/or license ever been suspended or revoked? _____				
6. Have you ever been convicted of an offense involving abuse or fraud? _____				
7. Have you ever been sued for malpractice involving a client? _____				
[If you have answered "yes" to any of the three questions above, please provide explanatory information on a separate sheet of paper and attach]				

8. Identify the approximate percentage distributions of the following conditions in your caseloads during the past

five (5) years:

Aphasia \_\_\_%; Dementia \_\_\_%; Voice \_\_\_%; Motor Speech Disorders \_\_\_%; Dysphagia \_\_\_%;  
Other Cognitive/Communicative Disorders \_\_\_% Other \_\_\_% (Total = 100%)

9. For each disorder listed below, identify the most frequent etiologies of the cases you have treated:

Aphasia \_\_\_\_\_ Dementia \_\_\_\_\_  
Voice \_\_\_\_\_ Motor \_\_\_\_\_  
Speech Disorders \_\_\_\_\_ Dysphagia \_\_\_\_\_  
Other Cognitive/Communicative \_\_\_\_\_

10. How would you best characterize your professional practice?

Primarily Diagnostic  
 Primarily Intervention  
 Both Diagnostic and Intervention

11. What is the percentage distribution of your caseload over the most recent five (5) years?

Adults (18 and older) \_\_\_%  
Children (under 18) \_\_\_%

## II. Letters of Recommendation and Documentation of CECs

Letters from the following three health care providers with first-hand knowledge of the applicant's clinical competence and skills are attached to this application (includes at least one Speech-Language Pathologist qualified to attest to the applicant's competence in clinical management of neurologic communication disorders)

1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_

The ANCDs CEC Documentation Form must be completed to verify continuing education complete during the past three years (see enclosed form).

III. Payment of Fees: Certification Application Fee enclosed \_\_\_US \$125 (ANCDs member) \_\_\_US \$210 (nonmember)  
[make checks payable to "ANCDs"]

Note: Applicants for Board Certification who also wish to apply for membership in ANCDs must complete the online membership application form. The Application for Membership requires payment of the current year's annual membership dues (\$120 for full members).

IV. Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

V. Attach a signed "Statement of Understanding" to this form. See enclosed form.

## VI. Knowledge and Competency Verifications

The applicant is encouraged to complete the Board Certification process within two years of the first case study. The Certification process involves the following steps:

*Step 1: Submission and review of the first Case Study* The written Case Study will be reviewed and deemed "Pass," "Revise," or "Fail."

*Step 2: Submission and review of the second Case Study* The second Case Study cannot be submitted until the first Case Study has been deemed a "pass."

*Step 3: Oral Presentation and Discussion* The candidate will not be approved to move to this step until both Case Studies have been successfully completed.

**Final Evaluation** The Written Case Studies and the Oral Presentation & Discussion will be judged as a whole and will be evaluated as "Pass" or "Fail" immediately following the Oral Presentation and Discussion. If the candidate passes, he or she will be informed by the committee and will then receive written verification that he or she has attained Board Certification.

updated  
8/2013

# Statement of Understanding

## For applicants for Board Certification in Neurologic Communication Disorders

I hereby apply for Board Certification in Neurologic Communication Disorders offered by the Academy of Neurologic Communication Disorders and Sciences. I understand that I am subject to all requirements of Board Certification as described herein and that Board Certification depends on successfully completing specified program requirements. If certified, my name will be included on the official registry of individuals who are Board Certified in Neurologic Communication Disorders.

I authorize the Certification Board and staff to make whatever inquiries and investigation they deem necessary to verify my credentials and professional standing. All information will be kept confidential and shall not be used for any other purposes without my permission.

I understand that continued compliance with the rules and regulations of the Certification Board and post-certification standards (including, but not limited to, payment of fees and adherence to continuing education requirements and the code of ethics), as adopted and amended from time to time, are conditions of my license to use the certification marks. If I fail to comply with any of the foregoing conditions, I will cease immediately all use of the marks.

I further agree that neither the ANCDs Executive Board or Certification Board nor its directors, officers, agents, employees and others acting on its behalf shall be liable to me for any actions taken or omitted in an official capacity or in the scope of employment, except to the extent that such actions or omissions constitute willful misconduct or gross negligence, and I thereby release the ANCDs Executive Board, Certification Board and others described above from any liability of such actions or omissions.

I affirm that I have read carefully and understand the items set forth in this Statement, including the release of liability and items in preceding sections of this form. I further affirm that my statements (including attachments) are true and complete to the best of my knowledge and freely given. I attest by my signature that I believe I meet all eligibility requirements for certification as stipulated. I understand that any misstatement of material fact submitted by me may be sufficient cause to bar me from the examination, cause revocation of certification or other appropriate action.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

Print Name \_\_\_\_\_

2345 Rice Street  
Suite 220  
St. Paul, MN 55113  
651-925-5528  
info@ancds.org  
<http://www.ancds.org>

## **ANCDS GUIDELINES FOR DOCUMENTING CONTINUING EDUCATION CREDITS (CECs)**

Dear Board Certification Applicant:

Please use the attached form to document CECs earned during the last three year period. Please note that 10 contact hours = 1 CEC; therefore 1.0 CEU = 1 CEC.

Six broad areas of activity can be credited: meetings; workshops; post Masters degree courses audited; post Masters degree courses taken for credit; presentations or courses taught; workshops; publications. Examples of activities that are applicable to each area are summarized in the next section.

Individuals who hold Board Certification are expected to engage in 60 hours of continuing education activities every three years. This keeps Certified members' knowledge and skills up to date and further enhances their ability to serve people with neurologic communication disorders. For this reason, applicants for Board Certification are asked to demonstrate their continuing education activities as a representation of their involvement in the field.

The following section summarizes and provides examples of activities that can meet CEC requirements. Please note that the activities listed under each continuing education category are just examples; they do not represent an exhaustive listing of acceptable activities. *If applicants are uncertain about the acceptability of certain activities, they should contact the Certification Board for clarification before submitting their application materials.*

Thank you for your application,  
The Board Certification Committee

### Category 1 - Professional Meetings

Examples: ANCDs Annual Meeting  
Clinical Aphasiology Conference  
Conference on Motor Speech  
Academy of Aphasia  
ASHA Convention  
State Speech-Language-Hearing Association Conventions  
Regional and local conferences  
Within work facility departmental meetings, grand rounds, guest lectures, etc.

Documentation: ASHA Continuing Education Registry transcripts  
Meeting program with proof of registration (e.g., receipt, attendee listing)  
For within-work facility activities without formal registration or documentation- a listing of topics and hours, with verification signed by a work supervisor

CEC Credits: **10 contact hours = 1 CEC**

### Category 2 - Workshops

Includes on-site workshops, seminars and presentations, teleconferences, and videoconferences; usually focused on a well-defined topic and presented by one or a few individuals.

Examples: PICA workshops  
ASHA-sponsored teleconferences  
ASHA/RTN videoconferences  
National Center for Neurogenic Communication Disorders Telerounds Workshops  
sponsored by hospitals, universities, private corporations, etc.

Documentation: ASHA Continuing Education Registry transcripts  
Workshop program with proof of registration (e.g., receipt, attendee listing)  
For within-work facility activities without registration or ASHA CEC documentation - a listing of topics and hours with verification signed by a work supervisor

CEC Credits: **10 contact hours = 1 CEC**

### Category 3 - Auditing Post - Masters Courses & Self-Study

Examples: Auditing graduate level courses  
Audio or videotape presentations viewed as self-study  
Special Interest Division 2 Newsletters read for self-study credit Other  
ASHA-sponsored self-study activities

Documentation: For audited courses, academic transcript or signed verification from course instructor  
For self-study activities, ASHA Continuing Education Registry transcripts or comparable documentation

CEC Credits: **1 course (regardless of number of credits) = 1 CEC**  
**10 contact hours for documented self-study = 1 CEC**

#### Category 4 - Completing Post-Masters Courses for Credit

Documentation: Academic transcript or signed verification from course instructor  
*Note: course must be passed*

CEC Credits: **1 course (regardless of number of credits) = 2 CECs**  
*Note: only 1.5 CECs outside the area of neurologic communication disorders can be credited toward recertification requirements*

#### Category 5 - Presentations

Examples: Refereed papers, poster sessions and presentations at national, state or regional professional meetings  
Invited workshops, seminars, presentations, teleconferences and videoconferences, Graduate level courses taught for credit (1 course = 1 presentation)

Documentation: Anything that documents authorship, title of presentation, location and date, such as programs, brochures, letters of acceptance, course outlines, course catalogues, published abstracts, etc.

CEC Credits: **1 presentation = 1 CEC** (regardless of duration of presentation)  
*Note: a specific presentation given multiple times can only be credited once in the three year recertification per year*

#### Category 6 - Publications

Examples: Refereed journal articles  
Invited articles in refereed journals  
Refereed or invited book chapters  
Books  
Standardized published tests  
*Note: published abstracts and letters to the editor cannot be credited as publications, but published abstracts can be used to document a presentation*

Documentation: Any of the following: reprint, first page of the publication with complete reference information, letter of acceptance

CEC Credits: **1 publication = 2 CECs**  
*Note: only 1.5 CECs outside the area of neurologic communication disorders can be credited toward recertification requirements*

**ANCDS CEC DOCUMENTATION  
SUMMARY SHEET**  
**ANCDS Office – 2345 Rice Street, Suite 220 – Saint Paul, Minnesota 55113**  
**Please complete legibly**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

AREA: Adult/Child **-circle one or both**

E-MAIL ADDRESS \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_

Please complete this form and attach appropriate documentation.

A. Please briefly identify each activity and numbers of hours for each below:

Category 1 - Professional Meetings

Activity	Neuro hours	Related area hours
1.		
2.		
3.		
4.		
5.		
Totals		

Category 1 CEC Total: \_\_\_\_\_

Category 2 - Workshops

Activity	Neuro hours	Related area hours
1.		
2.		
3.		
4.		
5.		
Totals		

Category 2 CEC Total: \_\_\_\_\_

Category 3 - Auditing Post-Masters Courses and Self-Study

Activity	Neuro hours	Related area hours
1.		
2.		
3.		
4.		
5.		
Totals		

Category 3 CEC Total: \_\_\_\_\_

Category 4 - Completing, for Credit, Post-Masters Level Courses

Activity	Neuro hours	Related area hours
1.		
2.		
3.		
4.		
5.		
Totals		

Category 4 CEC Total: \_\_\_\_\_

Category 5 - Presentations

Activity	Neuro hours	Related area hours
1.		
2.		
3.		
4.		
5.		
Totals		

Category 5 CEC Total: \_\_\_\_\_

Category 6 - Publications

Activity	Neuro hours	Related area hours
1.		
2.		
3.		
4.		
5.		
Totals		

Category 6 CEC Total: \_\_\_\_\_

B. Please summarize the number of CECs by category and indicate whether hours earned were in the area of neurologic communication disorders or in a related area:

	Neuro	Related Area
Category 1		
Category 2		
Category 3		
Category 4		
Category 5		
Category 6		
Total		

Total CECs for neuro \_\_\_\_\_

Total CECs for related areas: \_\_\_\_\_