

## Application For ABA Certified Retired Status

The American Board of Audiology offers a Retired status for ABA certificants who wish to retire and still retain their credential. To be eligible for Retired status, an applicant must:

- Have held the certification for the immediate past three years
- Hold an unrestricted license to practice audiology at the time of application
- Be fully retired from the practice audiology – no longer working full- or part-time or engage in any activities that require a license. Engagement in occasional consulting, mentoring, and/or guest lectures is permitted.

To apply for Retired status, submit the following to ABA:

- This completed application
- A copy of your current and valid state license

Email: [aba@audiology.org](mailto:aba@audiology.org) | Fax: 703-485-3555 | Mail: 11480 Commerce Park Dr, Suite 200, Reston, VA 20191

APPLICANT INFORMATION		
<b>Name:</b>		
<b>Credential(s):</b>		<b>Certification Number:</b>
<b>Initial Certification date(s):</b>	<b>State Issuing License:</b>	<b>License Number:</b>
<b>Current address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b>
<b>Email:</b>		
ATTESTATIONS		
By signing this application, I attest to the following:		
<ol style="list-style-type: none"> <li>1. I hold an unrestricted license to practice audiology at this time;</li> <li>2. I have held my ABA certification for the immediate past three years, and it is current at this time;</li> <li>3. I agree to abide by the ABA Code of Ethics;</li> <li>4. I agree to no longer work full or part time, or engage in clinical, educational, or precepting situation in our profession;</li> <li>5. I agree to not work full- or part-time or engage in any activities that would require a license to practice audiology;</li> <li>6. I agree to notify ABA should my work status change, at which time I would request reinstatement of my ABA certification and pay all current applicable fees; and</li> <li>7. I understand that the Retired designation will be applied to all my ABA credentials.</li> </ol>		
<b>Signature of applicant:</b>		<b>Date:</b>
ABA USE		
<b>Recommendation:</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>Date:</b>
<b>Notes:</b>		

