

## Speech-Language Technician Alternative Route to Licensure Application

Reminder: You must complete a background check before completing this application.

\*=response not required

### PERSONAL INFORMATION

Last Name	First	Middle	Maiden
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Street Address	City	State	Zip Code
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Telephone	Date of Birth	CACTUS ID	Ethnicity*	Gender
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Email

Are you a U.S. Citizen? Yes  No

If no, does your residency or visa status permit employment? Yes  No

Are you currently working in a licensed position? Yes  No  If yes, complete the following:

If no, contact Becky Lewis 801-538-7874 [rebecca.lewis@schools.utah.gov](mailto:rebecca.lewis@schools.utah.gov) .

LEA (District or Charter School)

Supervising Administrator	Email	Telephone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Supervising SLP	Email	Telephone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

### EDUCATION

College or University	Degree	Date Received	Major	Minor
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Minimum training to be accepted into the SLT ARL program is a Bachelor's Degree in Communication Disorders. Please provide Special Education with an **original transcript** with your degree posted.

**CONVICTION HISTORY**

Have you ever been convicted of violating any law (except minor traffic violations)? You must report Driving Under the Influence convictions. Yes  No

I verify that the above statements are true.

Signature

If a background check reveals that you have made false statements, your license may be revoked.

Submit this document by mail:  
UTAH STATE BOARD OF EDUCATION  
ATTN BECKY LEWIS  
250 E 500 S  
PO BOX 144200SALT LAKE CITY UT  
84114-4200

Questions? Please contact  
Becky Lewis  
801-538-77874  
[rebecca.lewis@schools.utah.gov](mailto:rebecca.lewis@schools.utah.gov)

ADA Compliant October 25, 2018