



Texas Department of Licensing and Regulation

PO Box 12057 • Austin, Texas 78711-2157

(800) 803-9202 • (512) 463-6599 • FAX (512) 475-2871

www.tdlr.texas.gov • cs.hearing.fitters@tdlr.texas.gov

FITTING AND DISPENSING OF HEARING INSTRUMENTS APPRENTICE PERMIT APPLICATION

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in black ink. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Use a paperclip to fasten all pages together, with the check or money order on top. **Do not use staples.**

DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.

LICENSE OR PERMIT REQUIRED. A person may not represent that the person is authorized to fit and dispense hearing instruments, or use in connection with the person's name, any designation tending to imply that the person is authorized to engage in the fitting and dispensing of hearing instruments, unless the person holds a license or is otherwise authorized to do so under this chapter.

Prior to completing this form, you must read the law, Texas Occupations Code, Chapter 402, and the program rules, 16 Texas Administrative Code Chapter 112. Do not complete the affidavit if you have not read the program law and rules.

1. APPRENTICE NAME – Write your legal name in the spaces provided. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. EXPIRATION DATE OF YOUR TEMPORARY TRAINING PERMIT – Give the date your Temporary Training Permit expires.
3. EMAIL ADDRESS – Write your email address. Please provide your email address so the department may email license information and required notices to you. Your email address is confidential pursuant to the Texas Public Information Act, and the department will not share it with the public.
4. PERSONAL PHONE NUMBER – Write a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
5. MAILING ADDRESS – Write your current mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
6. NAME OF HIGH SCHOOL/COLLEGE/UNIVERSITY ATTENDED AND GRADUATION DATE – List the high school, College and University you have attended and the dates you graduated from each.
7. SUPERVISOR'S NAME – Write your supervisor's legal name in the spaces provided. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
8. PRIMARY BUSINESS NAME – Full legal name of your employer.
9. SUPERVISOR'S EMAIL ADDRESS – Write your email address. Please provide your email address so the department may email license information and required notices to you. Your email address is confidential pursuant to the Texas Public Information Act, and the department will not share it with the public.
10. BUSINESS PHONE NUMBER – Write the telephone number, including the area code, of your place of employment.
11. PHYSICAL ADDRESS – Write the physical address of your place of employment. A post office box cannot be used for this address.
12. DISCIPLINARY ACTION HISTORY – Indicate if you have ever had an occupational license, certification, or Registration suspended, canceled, revoked, or denied in any state. If you have, complete and attach a Disciplinary Action Questionnaire for each disciplinary action. This form can be obtained from the TDLR website at [www.tdlr.texas.gov/misc/Disciplinary Action Questionnaire.pdf](http://www.tdlr.texas.gov/misc/Disciplinary_Action_Questionnaire.pdf).

13. **CRIMINAL HISTORY** – Indicate if you have ever been convicted of, or placed on deferred adjudication for, any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a Criminal History Questionnaire for each offense. This form can be obtained from the TDLR website at www.tdlr.texas.gov/MISC/lic002.pdf.

If you are worried your criminal history could prevent you from getting this license, Texas allows you to have your criminal history evaluated before submitting your application and non-refundable fees. To request a criminal history evaluation, submit a Criminal History Evaluation Letter, a completed Criminal History Questionnaire form for each crime you were convicted of, or placed on deferred adjudication for, and a \$25 fee. You can find more information on the process and download the necessary forms on the TDLR website at www.tdlr.texas.gov/crimHistoryEval.htm.

14. **STATEMENT OF APPLICANT** - Carefully read the statement before dating and signing your application.

LICENSURE PROCESS:

1. After obtaining a Temporary Training Permit:
 - a. complete 150-hours of direct supervised practicum.
 - b. complete 10 hours of masking under direct supervised practicum.
 - c. submit supervision logs, documenting completion of hours.
 - d. take and pass the Written Examination, which is administered by IHS. Take and pass the Practical Examination, which is administered several times a year, Examination Eligibility Packets are mailed prior to the examination date.
2. Upon passing both the Written Examination and the Practical Examination, complete and submit an Apprentice Permit application, Proof of Jurisprudence Exam, and Supervisor's Affidavit, with \$205 fee.

APPLICATION INFORMATION FOR MILITARY SERVICE MEMBERS, MILITARY VETERANS AND MILITARY SPOUSES

The Texas Department of Licensing and Regulation recognizes the contributions of our active duty military service members, their spouses, and veterans. If you want to use one of the licensing options available to military service members, military veterans and military spouses, please complete the **Military Service Member, Military Veteran or Military Spouse Supplemental Application (TDLR form MIL001)** and attach it with your license application. The form is located on the TDLR website at: <http://www.tdlr.texas.gov/misc/militarysupplemental.pdf>.

If you have additional questions about qualifications, training or experience requirements relating to occupation licensing for military service members, military veterans or military spouses please go to the TDLR Military Information web page at: <http://www.tdlr.texas.gov/military.htm>.

State law prohibits renewing a license more than once after a licensee has defaulted on a student loan guaranteed by the **Texas Guaranteed Student Loan Corporation (TGSLC)** unless the licensee has entered into a repayment agreement with TGSLC. **YOU SHOULD CONTACT TGSLC BEFORE FILING THIS APPLICATION** if you have defaulted on a student loan. An application or renewal may be rejected if this agency has received information from TGSLC that the applicant has defaulted on a student loan. The Texas Guaranteed Student Loan Corporation can be contacted at: **Texas Guaranteed ATTN: Collections, PO Box 83100, Round Rock, TX 78683-3100, Telephone: (800) 222-6297, <http://www.tgslc.org> or email: cust.assist@tgslc.org.**



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**FITTING AND DISPENSING OF HEARING INSTRUMENTS
 APPRENTICE PERMIT APPLICATION**

DO NOT WRITE ABOVE THIS LINE

**APPLICATION FEE: \$205
 (FEE IS NON-REFUNDABLE)**

This completed form must be accompanied by required educational documents and the application fee

APPRENTICE INFORMATION

1. Apprentice Name:

Last First Middle Name Suffix

2. Expiration date of your Temporary Training Permit:

3. Email Address:

4. Personal Phone Number:

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Ex: johndoe@aol.com See Instructions sheet for Disclosure

Area Code Number

5. Mailing Address:

(P.O. Box, Number, Street Name/Apartment Number)

City State Zip Code

6. List the name of High School, College/University you have attended and the date you graduated:

Name of High School: _____ Graduation Date: (mm/yy) _____

Name of College/University: _____ Graduation Date: (mm/yy) _____

SUPERVISOR AND EMPLOYMENT

7. Supervisor's Name:

Last First Middle Name Suffix

8. Primary Business Name:

9. Supervisor's Email Address:

10. Business Phone Number:

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Ex: johndoe@aol.com See Instructions sheet for Disclosure

Area Code Number

11. Physical Address: (A post office box cannot be used for this address.)

(Number, Street Name/Apartment Number)

City State Zip Code

12.	<p>Have you ever had an occupational license, certification or registration suspended, canceled, revoked or denied in any state? If YES, complete and submit a Disciplinary Action Questionnaire (DAQ) with this application. (This does not include your driver license)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.	<p>Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation? If YES, complete and submit a Criminal History questionnaire (CHQ) for each offense. <u>See instructions sheet for more information</u></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>14. STATEMENT OF APPLICANT</p>		
<p>The information which I have provided in this application is truthful and complete. I understand that providing false information of any kind may result in the voiding of this application, and my failing to be granted a license, or the revocation of my license.</p>		
<p>Signature _____</p>		<p>Date _____</p>



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**SUPERVISOR'S AFFIDAVIT
 APPRENTICE**

DO NOT WRITE ABOVE THIS LINE

The application for an apprentice permit shall be accompanied by the affidavit of a person duly licensed and qualified to fit and dispense hearing instruments in the State of Texas. The accompanying affidavit shall state that the applicant, if granted an apprentice permit, will be directly and/or indirectly supervised by the affiant in all work done by the applicant under such apprentice permit, the affiant will notify the committee within ten days following the applicant's terminating of supervision by affiant.

It shall be the responsibility of each holder of a license or, apprentice permit, under this Act to be familiar with and to avoid commission of any acts regarded as unethical practices by the Act. Full responsibility for the ethical conduct of an apprentice permit holder shall rest with the license holder who has agreed to be the permit holder's supervisor; provided, however, that such supervisor may relieve him/herself of such responsibility by discharging the holder of the apprentice permit, together with a letter explaining fully the circumstances under which the apprentice permit holder was separated from supervision.

The apprentice permit holder shall give written notice to the department of the transfer of supervision within 10 working days of change in supervisor.

I do hereby affirm that I am the holder of a valid, unrevoked, unsuspended license under Texas Occupations Code, Chapter 402, and 16 Texas Administrative Code Chapter 112 and that I have read the above excerpts. I fully understand my responsibilities as supervisor of the applicant who will work and train under my direct and/or indirect supervision and for whose technical training and ethical conduct I am to be responsible.

I further affirm that I have read the application of the above named person and that to the best of my knowledge all information is true and correct.

Applicant's Name:
 (please print) _____

Supervisor's Name:
 (please print) _____ License #: _____

Business Name:
 (please print) _____

Business Address:
 (please print) _____
 Address/City/State/Zip

Business Phone Number: _____ Business Fax Number: _____

 Signature of Supervisor

 Date