Complete forms must be submitted by the sponsor through email at MQA.HearingAid@flhealth.gov, fax at (850) 413-6982, or mail at:

Board of Hearing Aid Specialists

4052 Bald Cypress Way Bin C-08 Tallahassee, FL 32399-3257

Board of Hearing Aid Specialists Training Program Continuation Request



In accordance with Rule 64B6-8.003, Florida Administrative Code (F.A.C.), a trainee who fails the licensure examination must immediately stop functioning as a trainee upon receipt of the examination results. However, a trainee may continue one time in Stage IV of the training program by submitting this "Training Program Continuation Request" form to the board within 10 days of receiving the examination results.

1. TRAINEE INFORMATION					
Trainee Name:		Trainee AT #:(Required)			
		(Required)			
Address: Street	City		State	ZIP	
	City		State	ZIF	
Has your sponsor changed? Yes No					
Sponsor Name:		Sponsor Lic	cense #:		
Designee Name:		Designee L	icense #:		
(if applicable)		, 3			
Business Name:					
Business Telephone:	Busine	ess Fax:			
Training Site Address:					
Training Site Address:Street		City	State	ZIP	
I state my understanding that failure to sit for or receive a passwhich I am qualified will result in termination of trainee status seven days of the posting of the examination results.					
Trainee Signature:			Date: _	MM/DD/YYYY	
				MM/DD/YYYY	
2. SUPERVISOR AFFIRMATION					
Sponsor Signature:			Date: _		
				MM/DD/YYYY	
Designee Signature:			Date:		
-				MM/DD/YYYY	

Rule 64B6-8.002, F.A.C., requires sponsors and designees to be certified by the National Board for Certification in Hearing Instrument Sciences (NBC-HIS). Audiologists who are also licensed hearing aid specialists licensed under ch. 484, Part II, Florida Statutes, are not required to be NBC-HIS certified.