

REGISTERED BEHAVIOR TECHNICIAN RENEWAL APPLICATION

Please complete this form and return it to the address below along with the ***non-refundable*** renewal fee. We advise you to mail your renewal by **the 15th of the month in which your RBT credential expires** to ensure it is processed prior to your renewal deadline. Renewals that are received after the renewal date are considered late and should include the \$50 late fee. ***Be sure to keep a copy of this application for your own records.***

Mail this application, your RBT Competency Assessment, and your check for \$35 (payable to BACB, do not send cash) to:

BACB
7950 Shaffer Parkway
Littleton, CO 80127 USA

If you paid your renewal online by credit card, please include a printout of your receipt. **Applications that have been paid for online may be scanned and emailed to RBT@bacb.com in lieu of mailing a hard copy.**

When you submit this application, you MUST include a completed [RBT Competency Assessment](#) conducted no more than 45 days prior to the end-date of your credential.

1. Email Addresses:

(PLEASE PRINT CLEARLY – Use “Ø” to distinguish from the letter O, capitalize L and I to distinguish from 1.)

Permanent/Personal: _____

Alternate/Work: _____

2. RBT Credential #: _____ **3. Date Issued:** _____

4. Legal Name: _____

Check here for name change: Former Name: _____

(You must include documentation such as a copy of your new driver’s license.)

5. Mailing Address: _____

6. Telephone Number: ____ (_____) _____ - _____

ATTENTION: Only the RBT named in this application may complete the attestations below. If you are not the RBT, please cease your activity and have the RBT complete the remainder of the application.

A. SUPERVISION ATTESTATION

I, _____, attest that I have received supervision for 5% of my hours spent providing behavior-analytic services for the past year.

I understand that the BACB may ask me to provide documentation of my supervision. I also understand that providing false information to the BACB may be grounds for sanctioning my credential status.

Signed: _____ **Date:** _____

B. MANDATORY QUESTIONS AND ATTESTATION: You must complete **ALL** 3 questions.

1. Have you read, are you in compliance with, and do you agree to continued compliance with all Behavior Analyst Certification Board (“BACB”) rules and regulations, as may be revised, including, but not limited to the RBT eligibility and supervision requirements, disciplinary (professional conduct) rules, fees and application requirements?

YES _____ **NO** _____ **“NO” responses will not be processed.**

2. Do you have a physical or mental condition or addiction to any substance that could impair competent and objective professional performance of behavior analysis services and/or jeopardize public health and safety?

YES _____ **NO** _____ **Attach an explanation for “YES” responses.**

3. Have you been subject to an investigation or disciplinary action by a health care organization, professional association, governmental entity or regulatory or licensing agency/authority, and/or have you ever been convicted, found, or entered a plea of guilty or no contest, or are you presently being investigated or charged with any felony or misdemeanor directly relating to behavior analysis services or public health and safety?

YES _____ **NO** _____ **Attach an explanation for “YES” responses.**

If yes, was the investigation or matter timely reported to your Responsible Certificant?

List name of Responsible Certificant receiving report _____

List date of report and outcome _____

You must identify ALL investigations, allegations, charges and the outcomes thereof. YOU ALWAYS MUST NOTIFY YOUR RESPONSIBLE CERTIFICANT IMMEDIATELY IF ANY CIRCUMSTANCES ARISE THAT WOULD MODIFY YOUR CRIMINAL BACKGROUND CHECK OR APPLICATION TO THE BACB.

ATTESTATION: By signing, you acknowledge and affirm: (1) that you have carefully read and understand the BACB rules and requirements; (2) that you agree to abide by these terms, including, but not limited to, the RBT standards, the Terms of Use of the BACB website, the processing agreement in your initial application to the BACB and the applicable provisions of the [BACB Professional and Ethical Compliance Code for Behavior Analysts](#); and (3) that the information you have provided in this application and in the attached documentation is true and correct to the best of your knowledge.

PRINTED NAME: _____

SIGNATURE: _____

DATE: _____



Registered Behavior Technician™ (RBT®) Competency Assessment

Version 11/2016

Introduction

The BACB's RBT Competency Assessment is the basis for key eligibility and renewal requirements for the RBT credential. The assessment's administration instructions are below:

Assessor Qualifications

- » Must possess a BCBA/BCBA-D, BCaBA, or FL-CBA credential; and
- » Must have completed an 8-hour training based on the [BACB Supervisor Training Curriculum Outline](#); and
- » May be the same person who delivered the 40-hour RBT training program; and
- » Must not be related to, subordinate to, or employed by the applicant or RBT.

Assessment Instructions

- » The initial (pre-credential) assessment must be completed after the 40-hour RBT training has concluded.
- » The assessment may be administered by more than one assessor.
- » The assessment may be administered in person or live via the internet.
- » The assessment may be administered over multiple sessions.
- » The assessor(s) must provide an opportunity for the applicant or RBT to perform each skill, initial the box next to each skill after the individual has demonstrated competence, check either the "In-Vivo" or "Role-Play" box for each skill, and sign the attestation at the end of the assessment when the individual has demonstrated competence in every skill.
- » The assessor(s) must directly observe the applicant or RBT performing the task in a competent manner in-vivo with an actual client. Observation of video recorded behavioral samples is acceptable if the recordings were made for the purpose of this assessment. Role-play scenarios may be used when circumstances do not permit using clients (in-vivo). However, the entire set of tasks may not be demonstrated using only role-play assessment. Each task demonstrated via role-play must be indicated as such on the assessment form.
- » If an applicant or RBT does not demonstrate competence of a specific task, the assessor(s) can provide performance feedback and permit the individual to test again no earlier than the following day; this process may be repeated until competence is demonstrated.
- » Performance feedback may not be delivered during the final determination of a skill competence.
- » For items that are comprised of multiple skills (e.g., 2, 7, and 8), the applicant or RBT only needs to demonstrate competence in one of the skills.
- » Assessors may develop their own version of the RBT Competency Assessment form. These alternative forms must include all of the following elements:
 - RBT Task List sections listed individually (based on the form below)
 - A comment field for specific information from the assessment
 - An attestation at the end of the assessment that includes:
 - The assessor's name, signature, credential, and date signed
 - The relationship of the assessor to the applicant or RBT (e.g., employer, contracted)
 - The applicant's or RBT's name, signature, and date signed

Measurement

Task		Initials	Assessment Type <i>(check one)</i>
1	Implement continuous measurement procedures (e.g., frequency, duration).		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
2	Implement discontinuous measurement procedures (e.g., partial and whole interval, momentary time sampling).		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement permanent product recording procedures.		
3	Enter data and update graphs.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Assessment

Task		Initials	Assessment Type <i>(check one)</i>
4	Conduct preference assessments.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
5	Assist with functional assessment procedures.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Skill Acquisition

Task		Initials	Assessment Type <i>(check one)</i>
6	Use contingencies of reinforcement (e.g., conditioned/unconditioned reinforcement, continuous/intermittent schedules).		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
7	Implement discrete-trial teaching procedures.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement naturalistic teaching procedures (e.g., incidental teaching).		
	Implement task analyzed chaining procedures.		
8	Implement discrimination training.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement stimulus control transfer procedures.		
	Implement stimulus fading procedures.		
	Implement prompt and prompt fading procedures.		

Behavior Reduction

Task		Initials	Assessment Type <i>(check one)</i>
9	Implement interventions based on modification of antecedents such as motivating/establishing operations and discriminative stimuli.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement differential reinforcement procedures (e.g., DRA, DRO).		
	Implement extinction procedures.		
10	Implement crisis/emergency procedures according to protocol.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Documentation and Reporting

Task		Initials	Assessment Type <i>(check one)</i>
11	Generate objective session notes by describing what occurred during sessions.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Professional Conduct and Scope of Practice

Task		Initials	Assessment Type <i>(check one)</i>
12	Respond appropriately to feedback and maintain or improve performance accordingly. (May be assessed via observation by focusing on the "respond appropriately to feedback" element.)		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Comments

By signing below I attest that the competencies initialed above have been successfully demonstrated by the applicant or RBT.

Assessor's Name: _____

Assessors Signature & Credential: _____

Date Signed: _____

Relationship of Assessor to the applicant or RBT (circle one): Employer Contractual

Applicant or RBT Name: _____

Applicant or RBT Signature: _____

Date Signed: _____

Make additional copies of this page as necessary.

RBT Task List Items for Optional Interview Assessment

The tasks below are verbal competencies provided for informational purposes only, in the event the assessor(s) would like to evaluate these tasks independently of the Competency Assessment. For purposes of obtaining the RBT credential, these tasks will be assessed via the RBT exam.

Measurement

Prepare for data collection.

Assessment

Describe the behavior and environment in observable and measurable terms.

Assist with individualized assessment procedures (e.g., curriculum-based, developmental, social skills).

Skill Acquisition

Identify the essential components of a written skill acquisition plan.

Prepare for the session as required by the skill acquisition plan.

Implement generalization and maintenance procedures.

Assist with the training of stakeholders (e.g., family, caregivers, other professionals).

Behavior Reduction

Identify the essential components of a written behavior reduction plan.

Describe common functions of behavior.

Documentation and Reporting

Report other variables that might affect the client (e.g., illness, relocation, medication).

Professional Conduct and Scope of Practice

Describe the role of the RBT in the service delivery system.

Communicate with stakeholders (e.g., family, caregivers, other professionals) as authorized.

Maintain professional boundaries (e.g., avoid dual relationships, conflicts of interest, social media contacts).

Maintain client dignity.