

Consent to Suits

By signing this application, you acknowledge that if you are not a Virginia resident, or move outside of Virginia while you hold a Virginia Hearing Aid Specialist License, you understand that this application serves as a written power of attorney, whereby you appoint the Director of the Department of Professional and Occupational Regulation, and his/her successors in office, to be your true and lawful agent and attorney-in-fact, in your stead, upon whom all legal process against and notice to you may be served and who is hereby authorized to enter an appearance in your behalf in any case or proceedings arising out of the trade or profession practiced; and that by submitting this application you hereby agree that any lawful process against you which is duly served on said agent and attorney-in-fact shall be of the same legal force and validity as if served upon you.

- 12. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that I will notify the Department if I am subject to a disciplinary action or convicted of any felony or misdemeanor charges (in any jurisdiction) prior to receiving the requested permit. I certify that I understand and have complied with all the laws of Virginia related to hearing aid specialist licensure under the provisions of Title 54.1, Chapter 15, of the *Code of Virginia*, and the *Virginia Board for Hearing Aid Specialists Regulations*.

Signature _____ Date _____

BOARD FOR HEARING AID SPECIALISTS
Hearing Aid Temporary Permit Sponsor Training & Experience Agreement

The purpose of this Agreement is to establish the obligations of all parties participating in the Virginia Board for Hearing Aid Specialists Temporary Permit Training Program. Both the Temporary Permit Applicant/Holder and Licensed Sponsor are expected to read and comply with the Board's Regulations in its entirety. Portions of the Board's Regulations that specifically apply to the responsibilities of the Temporary Permit Holder and the Licensed Sponsor related to training and experience follow. Please note there are additional qualification requirements.

18 VAC 80-20-40. Qualifications for a temporary permit.

18 VAC 80-20-40.A. Any individual may apply for a temporary permit which is to be used solely for the purpose of gaining the training and experience required to become a licensed hearing aid specialist in Virginia. The licensed sponsor shall be identified on the application for a temporary permit and the licensed sponsor shall comply strictly with the provisions of subdivision 2 of this subsection.

18 VAC 80-20-40.A.1. A temporary permit shall be issued for a period of 12 months and may be extended once for not longer than six months. After a period of 18 months an extension is no longer possible and the former temporary permit holder shall sit for the examination in accordance with this section.

18 VAC 80-20-40.B. The licensed hearing aid specialist who agrees to sponsor the applicant for a temporary permit shall certify on the *Hearing Aid Specialist Temporary Permit Application* that as a sponsor he/she:

1. Assumes full responsibility for the competence and proper conduct of the temporary permit holder with regard to all acts performed pursuant to the acquisition of training and experience in the fitting and dealing of hearing aids;
2. Will not assign the temporary permit holder to carry out independent field work without on-site direct supervision by the sponsor until the temporary permit holder is adequately trained for such activity;
3. Will personally provide and make available documentation, upon request by the board or its representative, showing the number of hours that direct supervision has occurred throughout the period of the temporary permit; and
4. Will return the temporary permit to the department should the training program be discontinued for any reason.

By affixed signatures, the parties named below acknowledge that they have read and agree to comply with the Virginia Board for Hearing Aid Specialists Regulations and all requirements, terms and conditions as established in the *Virginia Board for Hearing Aid Specialist Temporary Permit Sponsor Training Standards*.

ACKNOWLEDGEMENT

Name of Temporary Permit Applicant

Signature of Temporary Permit Applicant

Date

Name of Licensed Hearing Aid Sponsor

Signature of Licensed Hearing Aid Sponsor

Date

Name of Licensed Hearing Aid Business Owner

Signature of Hearing Aid Business Owner

Date