

GENERAL INFORMATION FOR CERTIFICATION AS A REHABILITATION PROVIDER

ELIGIBILITY

The criteria for eligibility are set forth in section 18 VAC 115-40-22 on page 2 of the enclosed *Regulations Governing the Certification of Rehabilitation Providers* (booklet with blue cover). Please read the regulations prior to completing your application. The Board cannot make exceptions to requirements that are set forth in regulation.

You must meet two criteria to be considered for certification as a rehabilitation provider:

a. Education: Hold any baccalaureate degree from a regionally accredited college or university, or hold a current R.N. license in good standing in Virginia.

AND

b. Experience: Have received 2,000 hours of training *or* experience under appropriate supervision in performing the services that will be offered to a workers' compensation claimant.

APPLICATION INSTRUCTIONS

Submit application materials in one package to the address indicated above

Form 1. Application

Part I. General Information

In accordance with §54.1-116 of the *Code of Virginia*, you are required to include your Social Security Number, or your *Virginia* Department of Motor Vehicles control number on your application.

Applications that lack this information will not be processed, and fees will not be refunded. Federal and state law requires that this number be shared with other agencies for child support enforcement activities. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided for by law.

Part II. Education

You must submit an official transcript in a unopened envelope with the Registrar's stamp over the seal to document completion of a baccalaureate degree. If you attended more than one institution, only submit a transcript from the institution which awarded the degree.

Part III. Licensure/Certification

The Board will consider requests for a waiver of the examination requirement for individuals who hold a current license or certificate as a provider of rehabilitation services issued by another state, or by a nationally recognized board, association or commission. For each license or certificate listed, you must submit one copy of **Form 3**.

Part IV. Questions

Applications submitted without answers to any of the four questions in this section will not be processed.

Affidavit

Applications submitted without a signed, notarized affidavit will not be processed.

Form 2. Verification of Experience

Submit one copy of this form for each position that you wish to document. Training, alone or in combination with experience, must add up to 2,000 clock hours.

Part I.

Complete this part of the form and mail it to your supervisor(s) for completion of the remainder. Submit the completed form(s) in the employer's original unopened envelope with the employer's signature across the seal with the rest of your application package.

Part II.

Please review 18 VAC 115-40-27 of the regulations to ensure that your supervisor meets the requirements. Licenses held outside of Virginia must be verified by the licensing jurisdiction using Form 4.

Part III.

Indicate the time period that supervision was provided. Note that under 18 VAC 115-40-22, the traineeship shall not exceed 5 years.

Part IV

Indicate the type of experience provided. For internships, include a copy of the transcript with the application.

Part V

If the type of experience consisted of education provided on-the-job, complete this section. Either provide copies of certificates or diplomas, or the signature of the supervisor for each training received.

Part VI

Describe the duties the applicant performed.

Part VII.

As set forth under 18 VAC 115-40-26, applicants must receive an average of 2 hours of personal instruction a week, for a total of at least 100 hours. Half of the personal instruction must be face-to-face.

Part VIII.

Indicate the ability of the applicant to provide rehabilitation services.

Part IX.

The supervisor must sign and date the declaration.

Form 3. Verification of Licensure/Certification

Submit one copy of this form for each license or certificate indicated on **Form 1**. Complete Part I and forward the form to the state or organization that granted the license or certification for completion. Submit the completed verification form(s) with the rest of your application package. **If your license or certificate was granted by one of the boards in the Virginia Department of Health Professions, there is no need to submit Form 3. Your Virginia licensing/certification information can be accessed directly from this office.**

Fee

Include your check or money order for \$90.00 made payable to the Treasurer of Virginia. **The fee is non-refundable.** Applications submitted without the required fee will be returned.

EXAMINATION

All candidates who are not granted certification by endorsement by the Board will be required to pass an examination. Information on the certification examination is enclosed.

CERTIFICATION

Once a report of your passing score on the examination is received (or approval for certification by endorsement), your certificate will be issued. It will take about ten days for your certificate to be processed and mailed. **Copies of certificates cannot be faxed from the Board office.**