Commonwealth of Virginia
Department of Professional and Occupational Regulation
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Department of Professional and Occupational Regulation

Board for Hearing Aid Specialists and Opticians
HEARING AID SPECIALIST TRAINING & EXPERIENCE FORM
No Fee Required

In accordance with Section 18VAC80-20-40.C. of the Board for Hearing Aid Specialists and Opticians Regulations, the licensed sponsor shall provide training and shall ensure that the temporary permit holder under his/her supervision gains experience that covers the following subjects as they pertain to hearing aid fitting and the sale of hearing aids, accessories and services.

Instructions: for each subject, the sponsor should initial and enter the date completed.

Name of Temporary Permit Holder _____

Temporary Permit Number | 2 | 1 | 0 | 2 | | | | | | |

Name of Temporary Permit Holder Sponsor _____

Temporary Permit Number | 2 | 1 | 0 | 1 | | | | | | |

		Date	Sponsor's Initials
1.	Basic physics of sound		
2.	Basic maintenance & repair of hearing aids		
3.	The anatomy and physiology of the ear		
4.	Introduction to psychological aspects of hearing loss		
5.	The function of hearing aids & amplification		
6.	Visible disorders of the ear requiring medical referrals		
7.	Practical tests utilized for selection or modification of hearing aids		
8.	Pure tone audiometry, including air conduction, bone conduction & related tests		
9.	Live voice or recorded voice speech audiometry, including speech reception testing & speech discrimination testing.		
10.	Masking when indicated		
11.	Recording & evaluating audiograms & speech audiometry to determine the proper selection & adaptation of hearing aids		
12.	Taking earmold impressions		
13.	Proper earmold selection		
14.	Adequate instruction in proper hearing aid orientation		
15.	Necessity of proper procedures in after-fitting checkup		
16.	Availability of social service resources & other special resources for the hearing impaired		
17.	Joint review of Board for Hearing Aid Specialists and Opticians Regulations		

Signature of Temporary Permit Holder _____ Date _____ Contact Number _____

Signature of Temporary Permit Holder Sponsor _____ Date _____ Contact Number _____