

## 2021 APPLICATION FORM

Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC)

4-Year Term: January 1, 2021 – December 31, 2024

Deadline for Submission: May 1, 2020

Please submit your application, including a current CV, as an e-mail attachment to [cfcc@asha.org](mailto:cfcc@asha.org)

Name \_\_\_\_\_

Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Work Address \_\_\_\_\_

Home Address \_\_\_\_\_

Work# \_\_\_\_\_ Home# \_\_\_\_\_

Cell Phone \_\_\_\_\_ Preferred E-mail \_\_\_\_\_

Position for which you wish to be considered:

- ASHA-certified Audiologist
- ASHA-certified Speech-Language Pathologist
- Public Member

Area(s) in which you hold ASHA Certification:  Audiology  Speech-Language Pathology  
 N/A

Primary area of employment:  Academic  Practitioner

Area(s) in which you hold Specialty Board Recognition:

- Child Language  Fluency Disorders  None
- Swallowing and Swallowing Disorders  Intraoperative Monitoring

Are you currently serving on other ASHA boards or committees where your service would overlap with service on the CFCC?  No  Yes (specify the board/committee below)

NOTE: A current curriculum vitae (CV)—not to exceed 10 pages—may be submitted as your response to items 1 through 6 (please reference the pages of your vitae that relate to each item). Item 7 must be completed as described.

- 1. Describe your primary employment activity.**
  
- 2. Describe your secondary employment activity (if applicable).**
  
- 3. Identify your experience and present duties involving student academic preparation.**
  
- 4. Provide a summary of your previous activities on ASHA committees, boards, and/or councils. Include dates of service and specific contributions.**
  
- 5. Provide a summary of your activities in state and/or local speech and hearing association committees, boards, or offices, including dates of service and specific contributions.**
  
- 6. Provide a summary of your non-ASHA professional volunteering experiences (e.g. state licensing board, allied health organization, etc.). Please include dates of service and specific contributions.**



My signature below is verification of my interest and desire in serving on the CFCC, with my term beginning on January 1, 2021.

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Signature

Date

**Curriculum Vitae:**

*Please attach your current CV, **not to exceed 10 pages.***

Return this nomination form and attachments via e-mail to [cfcc@asha.org](mailto:cfcc@asha.org), or by fax or mail, no later than **May 1, 2020** to:

Carol Ann Raymond, Chair  
CFCC Nominating Committee  
c/o Todd Philbrick  
ASHA  
2200 Research Blvd. #313  
Rockville, MD 20850  
Fax: 301-296-8570