

ATTACH PHOTO
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THAN THIS SIZE

**LINE TECHNICIAN REGISTRATION
AND PROOF OF SUPERVISION**



MAIL TO:
Louisiana Behavior Analyst Board
4334 S. Sherwood Forest Blvd., Suite C-150
Baton Rouge, Louisiana 70816
(225) 295-8413
baadmin@la.gov

DROP OFF INFORMATION ON BOTTOM OF PAGE 2

LINE TECHNICIAN REGISTRATION FEE OF \$50.00 (NO PERSONAL CHECKS OR CASH)

I hereby submit this registration application and registration fee in the form of a **money order, cashier's or certified check** made payable to LBAB or **a Paypal receipt.** *Title 46, Part VIII. Chapter 3. §304. A.*

I further understand that such fees are **NOT** refundable and the decision of the Board is final. This is a registration fee and not the same as the background check processing fee you incurred if you went directly to LSP for the required criminal background check.

Title 46, Part VIII. Chapter 3. §304. B and Title 37 Chapter 60 §3708. C.

SS# _____ PARISH: _____ DOB: _____ GENDER: _____
Title 37 Chapter 60 §3708. A.

I - LINE TECHNICIAN'S INFORMATION

NAME: (Last, First, Middle Initial, Suffix)	MAIDEN NAME/ALIAS	CELL PHONE
HOME ADDRESS, CITY, STATE AND ZIP	EMAIL ADDRESS	

<input type="checkbox"/> YES ARE YOU A U.S. CITIZEN? <input type="checkbox"/> NO	IF NO, WHEN DO YOU EXPECT TO BECOME A U.S. CITIZEN? _____/_____/_____
<input type="checkbox"/> HIGH SCHOOL DIPLOMA <input type="checkbox"/> GED	DATE OBTAINED: _____/_____/_____

Title 37 Chapter 60 §3708. A.

II - SUPERVISOR'S INFORMATION

NAME: (LAST, FIRST, MIDDLE INITIAL, SUFFIX)	DEGREE:	EMAIL ADDRESS:
NAME OF BUSINESS/EMPLOYER:	ADDRESS, CITY, STATE AND ZIP	BUSINESS PHONE
LOUISIANA LICENSE NO. _____ # OF CLIENTS: _____	#OF LINE TECHNICIANS YOU SUPERVISE INCLUDING THIS APPLICANT: _____	#OF SCABAS YOU SUPERVISE INCLUDING THIS APPLICANT: _____

I hereby affirm the foregoing information, which I have supplied is true and accurate to the best of my knowledge. I understand I have the overall responsibility for providing the necessary supervision to protect the health and welfare of the patient/client receiving treatment from a line therapist. I affirm that if the supervision is changed in any way, I will immediately notify the LBAB. *Title 46, Part VIII. Chapter 5. Subchapter B. I also understand it is my responsibility to renew annually said registration. Title 37 Chapter 60 §3708. E.*

DATE: _____ SUPERVISOR'S ORIGINAL SIGNATURE: _____

III. ATTESTATION

NOTE: Any false or misleading information in, or in connection with this registration will be cause for immediate revocation.

In accordance with La. R.S. 37:3708(D), a line technician is registered by their supervising behavior analyst and does not hold a license with the Board. Their registration may be denied or revoked by the Board in the best interest of public safety and welfare. Because the line technician does not hold a license with the Board, they do not have a property interest in the registration by their supervisor and are not entitled to due process in the event of denial or revocation.

PLEASE READ CAREFULLY! The report we receive will show ANY arrests even if dismissed or not prosecuted.

1. Has the applicant **EVER** been arrested, charged with, pled guilty, pled nolo contendere or convicted of any crimes (including arrests, charges, and convictions that have been dismissed or expunged)? If "YES", attach a detailed explanation along with documentation regarding the status of the matter. **ADDITIONALLY, the undersigned also attests he/she understands if answering NO to question 1 and report shows answer was untruthful, he/she will automatically be revoked and cannot reapply for three (3) months from the date of revocation, provided the results do not warrant a two-year revocation. Re-application does not guarantee registration.**

- YES
 NO
-

2. I understand that as a line technician I **MUST** be supervised by an LBA and **CANNOT** work independently.

- YES
 NO
-

3. I affirm I will immediately notify the Louisiana Behavior Analyst Board if the supervision agreement is changed in any way.

- YES
 NO
-

4. Has the **line technician** ever applied or been registered as a Line Technician with the Louisiana Behavior Analyst Board?

- YES
 NO
-

The undersigned attests he/she is the person who executed this application and the statements herein contained are true in every respect; that he/she has not suppressed any information that might affect this application; he/she will conform to the ethical standards of conduct of the profession; and he/she has carefully read and understands this application and attestation.

Line Technician Applicant Original Signature

Date

APPLICATIONS MAY BE DROPPED OFF AT OUR OFFICE AS A CONVENIENCE ONLY. NO ONE IS AVAILABLE TO ASSIST YOU. THE PERSON AT THE FRONT DESK WORKS FOR A DIFFERENT BOARD. A LOCK BOX IS IN THE LOBBY. CALL YOUR SUPERVISOR/EMPLOYER WITH ANY QUESTIONS. ALL REGISTERED LINE TECHNICIANS MUST RENEW BY THE END OF EACH FISCAL YEAR REGARDLESS OF THE MONTH AND/OR DATE REGISTERED. YOUR SUPERVISOR WILL PROVIDE DETAILS AND FORMS. *Title 37 Chapter 60 §3708. E.*

Updated: 01/2023