

Application for LAMP Certification

A prerequisite to become LAMP certified is attendance at a 1 day or 1.5 day Center for AAC & Autism LAMP workshop. Please list the workshop that you attended.

Date of LAMP training attended _____

Place: _____

The LAMP Certification and Centers of Excellence programs have been developed to assure the quality and recognition of LAMP competencies. The program is designed for *licensed and credentialed* professionals from different disciplines who apply LAMP principles and practices in their existing areas of expertise and specialization.

Are you currently licensed? Yes _____ No _____

Profession: _____

License number: _____ State _____

Personal Information

Name: _____

Mailing Address: _____

Phone: _____

Place of Employment: _____

Employment Address: _____

Employment phone: _____

Email: _____

Please provide the name and address of the autism charity you would like for us to send a donation to in your name upon receipt of your certification. (Please note that this donation will be from the Center for AAC & Autism, you will not receive a tax donation form).

By applying to become LAMP certified, I agree to the following:

To inform the Center for AAC & Autism if, at anytime, my licensure status is expired or not renewed for any reason

To represent LAMP as a treatment approach trademarked by the Center for AAC & Autism

I understand that LAMP certification reflects my ability to skillfully apply LAMP in my clinical practice but is not meant to direct or limit my clinical judgment in choosing or implementing treatment methods for my clients.

I understand that acquisition of LAMP certification is based on demonstration of clinical competencies and the determination of successful completion of the program requirements will be solely that of The Center for AAC & Autism.

Employees, contractors, or agents of companies who manufacture, sell, or distribute AAC devices and materials are not eligible to apply or participate in the LAMP certification program. LAMP certified professionals who contract with the Center for AAC & Autism to give LAMP presentations will be able to maintain their certification. By signing this document, I attest that I am not an employee, contractor, or agent of any company that manufactures, sells, or distributes AAC devices and materials and will immediately notify the Center for AAC & Autism if that status changes.

Applicant

Date

Please mail completed application along with the application fee of \$199 to:

The Center for AAC & Autism

ATTN: Courtney Drown

P.O. Box 1317

Wooster, OH 44691

If you have any questions, call Courtney at 1-866-998-1726

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