



FITTING AND DISPENSING OF HEARING INSTRUMENTS TEMPORARY TRAINING PERMIT APPLICATION

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in black ink. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Use a paperclip to fasten all pages together, with the check or money order on top. **Do not use staples.**

DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.

BE SURE TO NOTIFY YOUR EMPLOYER THAT YOU WILL BE UNABLE TO PRACTICE WHILE YOU WAIT FOR YOUR TEMPORARY TRAINING PERMIT.

All new applicants will be required to submit fingerprints to the Texas Department of Public Safety (DPS). Instructions are included on the last pages of this application.

LICENSE OR PERMIT REQUIRED. A person may not represent that the person is authorized to fit and dispense hearing instruments, or use in connection with the person's name, any designation tending to imply that the person is authorized to engage in the fitting and dispensing of hearing instruments, unless the person holds a license or is otherwise authorized to do so under this chapter.

Prior to completing this form, you must read the law, Texas Occupations Code, Chapter 402 and the program rules, 16 Texas Administrative Code Chapter 112. Do not complete the applicant's affidavit if you have not read the program law and rules.

1. NAME – Write your legal name in the spaces provided. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. NAME ON TRANSCRIPT(S) AND/OR HIGH SCHOOL DIPLOMA – If the name is different from item 1 enter the other names in this field.
3. DATE OF BIRTH – Write your birthdate.
4. SOCIAL SECURITY NUMBER – Social Security number disclosure is required by Section 231.302(1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:

www.oag.state.tx.us/child/index or call (512) 460-6000 or (800) 252-8014.
5. EMAIL ADDRESS – Write your email address. Please provide your email address so the department may email license information and required notices to you. Your email address is confidential pursuant to the Texas Public Information Act, and the department will not share it with the public.
6. PERSONAL PHONE NUMBER – Write a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
7. BUSINESS PHONE NUMBER - Write the telephone number, including the area code, of the business listed.
8. MAILING ADDRESS – Write your current mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
9. HAVE YOU EVER TAKEN A WRITTEN EXAMINATION TO FIT AND DISPENSE HEARING INSTRUMENTS – Indicate by checking the box Yes or No. If Yes, give the name of test, the date the test was taken, the score and the state which you completed the written examination.
10. HAVE YOU EVER TAKEN A PRACTICAL EXAMINATION TO FIT AND DISPENSE HEARING INSTRUMENTS – Indicate by checking the box Yes or No. If Yes, give the date taken, the scores and State which you completed the practical examination.

11. **HAVE YOU EVER BEEN ISSUED A TEMPORARY TRAINING PERMIT** – Indicate by checking the box Yes or No. If Yes, give the state from which the permit was issued, permit number and date issued.
12. **HAVE YOU EVER BEEN ISSUED AN APPRENTICE PERMIT BY ANOTHER STATE JURISDICTION OR TERRITORY** - Indicate by checking box Yes or No. If Yes, give the State(s) from which the permit was issued, permit number, date issued and how long the apprenticeship was.
13. **CURRENT EMPLOYMENT** – Please list the contact information for your current employer.
14. **ACADEMIC TRAINING** - List all high schools, colleges and universities attended and attach additional pages if necessary.
15. **CRIMINAL HISTORY** – Indicate if you have ever been convicted of, or placed on deferred adjudication for, any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a Criminal History Questionnaire for each offense. This form can be obtained from the TDLR website at www.tdlr.texas.gov/MISC/lic002.pdf.

If you are worried your criminal history could prevent you from getting this license, Texas allows you to have your criminal history evaluated before submitting your application and non-refundable fees. To request a criminal history evaluation, submit a Criminal History Evaluation Letter, a completed Criminal History Questionnaire form for each crime you were convicted of, or placed on deferred adjudication for, and a \$25 fee. You can find more information on the process and download the necessary forms on the TDLR website at www.tdlr.texas.gov/crimHistoryEval.htm.
16. **HAVE YOU COMPLETED THE FINGERPRINTING PROCESS** - If Yes, please attach a copy of the Fast Pass receipt? You do not submit proof of fingerprints if you choose the out of state process. If No, you must complete the fingerprint process before your application may be reviewed.
17. **DISCIPLINARY ACTION HISTORY** – Indicate if you have ever had an occupational license, certification, or Registration suspended, canceled, revoked, or denied in any state. If you have, complete and attach a Disciplinary Action Questionnaire for each disciplinary action. This form can be obtained from the TDLR website at www.tdlr.texas.gov/misc/Disciplinary Action Questionnaire.pdf.
18. **STATEMENT OF APPLICANT** - Carefully read the statement before dating and signing your application.

LICENSURE PROCESS:

1. Apply and obtain a Temporary Training Permit. Issued for one year.
2. Complete 150-hours of direct supervised practicum.
3. Complete 10 hours of masking under direct supervised practicum.
3. Take and pass the Written Examination, which is administered by HIS. Take and pass the Practical Examinations, which is administered several times Examination Eligibility Packets are mailed 60-days prior to the examination date.

CHECKLIST OF REQUIRED DOCUMENTATION TO BE SUBMITTED WITH APPLICATION AND FEE:

Applications will not be processed until all required documents are received. To expedite your application, collect all documents and send them with your application. Having documents sent separately can significantly delay the processing of an application.

- Application and the \$205.00 fee
- Supervisor's Affidavit (included with this application)
- Official diploma or official transcript indicating graduation from high school (a photocopy which has been notarized as a true and exact copy can be submitted) or certificate of high school equivalency issued by the appropriate education agency or an official transcript(s) from an accredited college or university indicating a college degree was awarded

APPLICATION INFORMATION FOR MILITARY SERVICE MEMBERS, MILITARY VETERANS AND MILITARY SPOUSES

The Texas Department of Licensing and Regulation recognizes the contributions of our active duty military service members, their spouses, and veterans. If you want to use one of the licensing options available to military service members, military veterans and military spouses, please complete the **Military Service Member, Military Veteran or Military Spouse Supplemental Application (TDLR form MIL001)** and attach it with your license application. The form is located on the TDLR website at: <http://www.tdlr.texas.gov/misc/militarysupplemental.pdf>.

If you have additional questions about qualifications, training or experience requirements relating to occupation licensing for military service members, military veterans or military spouses please go to the TDLR Military Information web page at: <http://www.tdlr.texas.gov/military.htm>.

State law prohibits renewing a license more than once after a licensee has defaulted on a student loan guaranteed by the **Texas Guaranteed Student Loan Corporation (TGSLC)** unless the licensee has entered into a repayment agreement with TGSLC. **YOU SHOULD CONTACT TGSLC BEFORE FILING THIS APPLICATION** if you have defaulted on a student loan. An application or renewal may be rejected if this agency has received information from TGSLC that the applicant has defaulted on a student loan. The Texas Guaranteed Student Loan Corporation can be contacted at: **Texas Guaranteed ATTN: Collections, PO Box 83100, Round Rock, TX 78683-3100, Telephone: (800) 222-6297, <http://www.tgslc.org> or email: cust.assist@tgslc.org.**



TEXAS DEPARTMENT OF PUBLIC SAFETY CRIME RECORDS SERVICE
Access & Dissemination Bureau



**PROCEDURE TO ACCESS CRIMINAL HISTORY RECORD INFORMATION (CHRI) FOR
(Department of Licensing & Regulation-Fitting and Dispensing of Hearing Instruments Applicants)**

FINGERPRINTS SUBMITTED ELECTRONICALLY TO DPS: The DPS has entered into an exclusive contract with MorphoTrust USA to provide statewide electronic fingerprinting through DPS FAST locations operated by Identogo. Fingerprint Applicant Services of Texas (FAST) are available by scheduling an appointment on-line at <https://uenroll.identogo.com/servicecode/119QFY> or by calling 1-888-467-2080. DPS FAST locations operated by Identogo are committed to a 98% classifiable rate which means quality prints, less rejections, and quick responses.

1. SCHEDULING YOUR FINGERPRINT APPOINTMENT:

Fingerprint Applicant Services of Texas (FAST) are available by scheduling an appointment on-line at <https://uenroll.identogo.com/servicecode/119QFY> or by calling 1-888-467-2080.

When Scheduling Online:

- a) Select **Schedule Appointment**.
- b) Follow the prompts to enter requested information.
- c) Select a location nearest to you and a convenient date and time.
- d) Once you have scheduled your appointment you are not required to bring the service code form to your appointment.

When Scheduling Over the Phone:

- a) Have the Texas Fingerprint Service Code form before calling.
- b) MorphoTrust will prompt you for the service code.
- c) The service code for a personal review is **119QFY**.
- d) The call center operator will ask you for your demographic information, i.e. Date of Birth, Sex, Race, Ethnicity, Height, Weight, Eye Color, Hair Color, Place of Birth and Home Address.
- e) You will select a location nearest to you for your fingerprint appointment.
- f) Once you have scheduled your appointment you are not required to bring the service code form to your appointment.

2. YOUR FINGERPRINT APPOINTMENT:

- a) Arrive at your scheduled appointment with your photo identification and fee payment.
- b) If you plan on bringing a form of identification other than a valid (unexpired) TX Driver License, please refer to the Department of Public Safety's acceptable document types here:
<http://www.l1enrollment.com/state/forms/tx/55fc619a7f7aa.doc>
- c) MorphoTrust accepts Visa/MasterCard/Discover/American Express, business checks, money orders and coupon codes (employer accounts) at the time of service.
***Please note that personal checks and cash will not be accepted.**
- d) Your fingerprints will be submitted electronically to DPS and the FBI. You will not receive a printed fingerprint card.
- e) At the conclusion of your appointment, the MorphoTrust enrollment agent will provide you with an Identogo receipt stating that you were fingerprinted.
- f) Do not throw away the receipt.
- g) You may check status on your submission by clicking on this link:
<https://uenroll.identogo.com/servicecode/119QFY>

Fingerprints provided for this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation, in accordance with applicable statutes.

FINGERPRINTS SUBMITTED BY MAIL (Such as for out of state applicants) THROUGH MORPHOTRUST: The following process must be followed to submit fingerprint hard cards to MorphoTrust. The results will be mailed to the designated recipient provided by the individual. If you have any questions, please call (512) 424-5079.

3. PRE-ENROLL YOUR FINGERPRINT HARD CARD SUBMISSION:

Online Registration:

- a) You may begin the process now by clicking on this link: <https://uenroll.identogo.com/servicecode/119QFY>
- b) Choose "Submit a Fingerprint Card by Mail".
- c) Complete Person Information and Designated Recipient screens.
- d) Complete payment screen.
- e) Print the confirmation document (contains bar code).
- f) Sign the waiver and fill in contact information.

Telephone Registration:

- a) You may contact MorphoTrust at 888-467-2080.
- b) Please have the TX Fingerprint Service Code form before you call –MorphoTrust will prompt you for the Service Code.
- c) Your Service Code is **11G2VS**.
- d) Inform the MorphoTrust representative that you wish to pre-enroll for a "hard card submission".
- e) Once payment is complete a summary confirmation document will be emailed to you.
- f) Print the confirmation document, sign the waiver and fill in the contact information.
- g) Once you have obtained your fingerprint cards, follow mail-in directions on the confirmation page.

PAY BY CREDIT CARD, BUSINESS CHECK OR MONEY ORDER

During your registration you will be provided an opportunity to make your payment by credit card or to elect to mail in your payment by business check or money order made out to MorphoTrust USA with your submission.

*** No Personal Checks will be accepted**

4. COMPLETE THE FINGERPRINT CARD:

Following information regarding person whose record is to be searched, must be completed on the fingerprint card:

- a) Printed last name, first name, middle name of individual, including all alias names.
- b) Sex, race, date of birth, Social Security Number.
- c) Complete, legible set of fingerprints on a DPS approved fingerprint card which may be obtained from a law enforcement agency or FAST provider near you. Visit <https://uenroll.identogo.com/servicecode/119QFY> or call 1-888-467-2080 to locate a FAST provider near you. **Individual's signature must be on the fingerprint card.**

*The cost for obtaining an ink card may vary and is not included in the Texas Background check fingerprint registration process or fee. Cards **must** be mailed to the vendor, fingerprints cannot be submitted electronically from outside the State of Texas.*

5. SUBMISSION:

Mail the completed Personal Review Service Code Form, completed fingerprint card and payment (if applicable) to:

**MorphoTrust USA Texas Card Scan
3051 Hollis Dr, Ste 310
Springfield, IL 62704**



TDLR - EXMNRS-FIT/DISPENS HEARING INST

Texas Fingerprint Service Code Form

Service Name: TDLR - EXMNRS-FIT/DISPENS HEARING INSTRMTS

To schedule your ten-minute fingerprint appointment, simply visit
<https://uenroll.identogo.com> and enter the following Service Code

119QFY

Service Code is unique to your hiring/licensing agency. Do not use this code for another purpose.

Background Check Waiver

I certify that all information I provided in relation to this criminal history record check is true and accurate. I authorize the Texas Department of Public Safety (DPS) to access Texas and Federal criminal history record information that pertains to me and disseminate that information to the designated Authorized Agency or Qualified Entity with which I am or am seeking to be employed or to serve as a volunteer, through the DPS Fingerprint-based Applicant Clearinghouse of Texas and as authorized by Texas Government Code Chapter 411 and any other applicable state or federal statute or policy.

I authorize the Texas Department of Public Safety to submit my fingerprints and other application information to the FBI for the purpose of comparing the submitted information to available records in order to identify other information that may be pertinent to the application. I authorize the FBI to disclose potentially pertinent information to the DPS during the processing of this application and for as long hereafter as may be relevant to the activity for which this application is being submitted. I understand that the FBI may also retain my fingerprints and other applicant information in the FBI's permanent collection of fingerprints and related information, where all such data will be subject to comparisons against other submissions received by the FBI and to further disseminations by the FBI as may be authorized under the Privacy Act of 1974 (5 USC 552a). I understand my fingerprints will be searched by and against civil, criminal and latent fingerprints in the Next Generation Identification (NGI) system. I understand I am entitled to obtain a copy of any criminal history record check and challenge the accuracy and completeness of the information before a final determination is made by the Qualified Entity. I also understand the Qualified Entity may deny me access to children, the elderly, or individuals with disabilities until the criminal history record check is completed. If a need arises to challenge the FBI record response, you may contact the agency that submitted the information to the FBI, or you may send a written challenge request to the FBI's Criminal Justice Information Services (CJIS) Division at FBI CJIS Division, Attention: Correspondence Group, 1000 Custer Hollow Road, Clarksburg, WV 26306.



Don't have access to the Internet? You can still schedule an appointment by calling 888.467.2080



**FITTING AND DISPENSING OF HEARING INSTRUMENTS
 TEMPORARY TRAINING PERMIT APPLICATION**

DO NOT WRITE ABOVE THIS LINE

**APPLICATION FEE: \$205
 (FEE IS NON-REFUNDABLE)**

This completed form must be accompanied by required educational documents and the application fee

1. Name:

_____ Last _____ First _____ Middle Name _____ Suffix

2. Name on transcript(s): (if different from #1)

_____ Last _____ First _____ Middle Name

3. Date of Birth:

4. Social Security Number:

Month Day Year

See Instruction Sheet for Disclosure Information

5. Email Address:

6. Personal Phone Number:

7. Business Phone Number:

Ex: johndoe@aol.com See Instructions sheet for Disclosure)

Area Code

Number

Area Code

Number

8. Mailing Address:

(P.O. Box, Number, Street Name/Apartment Number)

City _____ State _____ Zip Code _____

9. Have you ever taken a written examination to fit and dispense hearing instruments? Yes No

If Yes, (a) give the name of test, date taken and score(s):

(b) Give the State(s) from which you completed the written examination in:

10. Have you ever taken a practical examination to fit and dispense hearing instruments? Yes No

If Yes, (a) give the date taken and scores:

(b) Give the State(s) from which you completed the practical examine in:

11. Have you ever been issued a temporary training permit? Yes No

If Yes, give the State(s) from which the permit was issued, permit number and date issued:

12. Have you ever been issued an apprentice permit by another state(s), jurisdiction, or territory? Yes No

If Yes, give the State(s) from which the permit was issued, permit number, date issued and how long the apprenticeship was:

EMPLOYMENT– ACADEMIC TRAINING

13. Current Employment Contact Information

• Place of Employment:

• Telephone Number (include area code):

• Address (include zip code):

• Job Title:

• Beginning (Mo/Yr.):

14. Academic Training: (List all high schools, colleges and universities attended and attach additional pages if necessary)

• Name of High School, College/University/Institution:

• Location (city, state, zip):

• Inclusive dates attended,
Begin (Mo/Yr.):

• End (Mo/Yr.):

• Type of Degree
Granted:

• Major
Field:

• Name of High School, College/University/Institution:

• Location (city, state, zip):

• Inclusive dates attended,
Begin (Mo/Yr.):

• End (Mo/Yr.):

• Type of Degree
Granted:

• Major
Field:

• Name of High School, College/University/Institution:

• Location (city, state, zip):

• Inclusive dates attended,
Begin (Mo/Yr.):

• End (Mo/Yr.):

• Type of Degree
Granted:

• Major
Field:

15. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation? Yes No

If YES, complete and submit a Criminal History questionnaire (CHQ) for each offense.

See instructions sheet for more information

16. Have you completed the fingerprint process for state licensure? Yes No

If Yes, please attach a copy of the Fast Pass receipt.

17. Have you ever had an occupational license, certification or registration suspended, canceled, revoked or denied in any state? Yes No

If YES, complete and submit a Disciplinary Action Questionnaire (DAQ) with this application.

(This does **not** include your driver license)

18. STATEMENT OF APPLICANT

The information which I have provided in this application is truthful and complete. I understand that providing false information of any kind may result in the voiding of this application, and my failing to be granted a license, or the revocation of my license.

Signature _____

Date _____



Texas Department of Licensing and Regulation
 PO Box 12057 • Austin, Texas 78711-2157
 (800) 803-9202 • (512) 463-6599 • FAX (512) 475-2871
 www.tdlr.texas.gov • cs.hearing.fitters@tdlr.texas.gov

**SUPERVISOR'S AFFIDAVIT
 TEMPORARY TRAINING PERMIT**

DO NOT WRITE ABOVE THIS LINE

The practicum experience of temporary training permit holders must be done under the direct supervision of an individual who holds a valid license, from the Texas Department of Licensing and Regulation (TDLR), to fit and dispense hearing instruments in the state of Texas. Direct supervision means the physical presence of a supervisor any time a temporary permit holder is engaged in the act of fitting and dispensing hearing instruments.

The application for a temporary training permit shall be accompanied by the affidavit of a person duly licensed and qualified to fit and dispense hearing instruments in the State of Texas. The accompanying affidavit shall state that the applicant, if granted a temporary training permit, will be directly supervised by the affiant in all work done by the applicant under such temporary training permit, the affiant will notify TDLR within ten days following the applicant's terminating of supervision by affiant.

- It shall be the responsibility of each holder of a temporary training permit under this Act to be familiar with and to avoid commission of any acts regarded as unethical practices by the Act. Full responsibility for the ethical conduct of a temporary permit holder shall rest with the license holder who has agreed to be the permit holder's supervisor; provided, however, that such supervisor may relieve him/herself of such responsibility by discharging the holder of the temporary training permit, together with a letter explaining fully the circumstances under which the temporary training permit holder was separated from supervision.
- I further understand that if the temporary permit holder fails the practical examination, the temporary training permit holder must repeat the hours of direct supervision. I do hereby affirm that I am the holder of a valid, unrevoked, unsuspended license under Texas Occupations Code, Chapter 402 or Texas Administrative Code, 16 Chapter 112, and that I have read the above and that I fully understand my responsibilities as supervisor of the temporary permit holder who will work and train under my direct supervision and for whose technical training and ethical conduct I am to be responsible.
- I further affirm that I have read the application of the above named person and that to the best of my knowledge all information is true and correct.

Applicant's Name:
 (please print) _____

Supervisor's Name:
 (please print) _____ License #: _____

Business Name:
 (please print) _____

Business Address:
 (please print) _____
 Address/City/State/Zip

Business Phone Number: _____ Business Fax Number: _____

 Signature of Supervisor

 Date