

Dear Applicant:

Thank for your inquiry regarding the American Board of Vocational Experts. ABVE has set forth the following formalized standard for identifying persons for board certification as Vocational Experts. The person must:

- A) Be a current ABVE Associate Member
- B) Have Masters or Doctoral transcripts: Proof of transcripts/equivalent coursework, and sample work experience. Any discipline that deviates from the list below will be reviewed by the Peer Review Committee to determine if it qualifies you.
 - Masters/Doctorate in School Psychology
 - Masters/Doctorate in Psychology (MA, MS, M.Ed.)
 - Masters/Doctorate in Rehabilitation
 - Masters/Doctorate in Social Work
 - Masters/Doctorate in Therapy/Family Therapy/Counseling
 - Masters/Doctorate in Health Related Field
 - Masters/Doctorate in Education
 - Masters/Doctorate in Vocational/Counseling Vocational/Rehabilitation
- C) Have specific training and experience in such areas as assessment, functional capacity measures, psychological testing and measurement, job analysis, job placement, job surveys, and have experience providing testimony in these areas;
- D) Display knowledge and expertise within a submitted forensic work product; and,
- E) Attain a passing score on the ABVE examination.

FELLOW status requires three years of documented experience in assessment of vocational capacity and vocational expert forensics in addition to the requirements listed above.

DIPLOMATE status requires seven years of documented experience in the area of assessment of vocational capacity and vocational expert opinion and demonstration of distinguished performance or recognition as a vocational expert, in addition to the above requirements. This might include the following: published works; leadership position in a professional organization; presentation of papers at professional organization; presentation of papers at professional seminars; and/or sitting on study groups or legislative committees to enhance the professionalism of an organization.

The American Board of Vocational Experts recognizes and supports the policies and high professional standards of the various rehabilitation credentialing bodies. This view is all-encompassing but focused on the integrity and industry demand for high ethical policies and practice. ABVE maintains a strict ethics approach to take rapid action with professional members who are found to have violated one or more of these canons. It is with this philosophy that professionals who have been sanctioned by any vocational rehabilitation credentialing body with

loss of membership will not be allowed to take the ABVE examination or hold the ABVE credential.

To be considered for certification, <u>you must meet the above criteria</u> and submit your application with accompanying documents requested. The application fee of \$225 is non-refundable. References should be individuals who can attest to the applicant's knowledge in forensics work, and they should be attorneys, judges, insurance companies or other referral sources who have utilized the candidate in this regard. Supervisors or co-workers are not acceptable.

Fees Required at Time of Application:

- o \$225 One-time non-refundable application fee
- \$195 Associate ABVE Membership fee (if not a current ABVE Member)

Once criterion are met the following fee will apply for certification to be valid:

○ \$80 – ABVE F/D Credential Fee

Fees for Maintaining ABVE Fellow/Diplomate Once Certification is Valid:

- o \$195 ABVE Membership fee will be due January 1st of each year
- \$80 ABVE F/D Credential Fee will be due January 1st of each year

Fee Policy Should ABVE F/D Application not fulfill all requirements:

 Should an applicant submit the ABVE F/D application along with the fee and the Peer Review process finds the applicant short in experience or coursework, <u>the applicant</u> <u>will have 1 year from the date of application to fulfil all requirements</u>. Once the year has lapsed and if requirements have not been met the applicant must submit a new application and application fee.

Other Maintenance Requirements:

CEU credits will be required to maintain your ABVE F/D Certification. The certification cycle is a 3-year cycle. The period will begin January 1, 2022 and end December 31, 2024. You must retain 42-hours on file with ABVE at the end of each cycle to maintain your ABVE F/D certification.

When headquarters receives your completed application, it will be reviewed by the Credentials Peer Review Committee. **If you pass peer review, you will be invited to sit for the exam.** On completion of the exam, you will be notified of the Committee's recommendations. If you have any questions, please feel free to contact our corporate office at (919) 926-3265 and speak to Membership Services.

Before Mailing Your Application Checklist:

☐ A completed application
□ Non-refundable application fee of \$225 made out to ABVE
□ \$195 for ABVE membership (of not already a current ABVE member)
☐ College transcripts in a sealed envelope from the institution rendering the degree(s)
□ CV and/or resume
□ 3 Letters of reference each in a sealed envelope.
☐ Work product - redacted
☐ Signed Code of Ethics
All forms received shall be in a legible status, written in English or they will be returned to the applicant.
Any questions may be directed to abve@abve.net .



Application for Certification

(Complete all sections)

Date:			Referred by:		
Applying for:	Fellow	☐ Diplomate			
Name:					
	Firs	et .	Middle		Last
Address:				<u></u> .	
City:			State:		
Current Posit Firm:	ion:				
Previous posi	itions: (Ple	ase list most curre	ent first)		
Dates	Position			Organization	
Vocational E	xpert Wor	rk:			

Education:			
Dates Attende	d	Institution	Degree Earned
Professional aff	filiatior	ns: (Please identify any offices held, past or present.)	
Have you ever	had a	certificate, license, or other professional credential suspend	ed or revoked or
		led from membership from any organization? ☐ Yes ☐ No	
If yes, please lis	st reas	son and date:	
Have you ever	been (convicted of a felony? ☐ Yes ☐ No If yes, please list reaso	n and date.
		, = = , ,,	
		and/or certifications:	
Date	туре	or Level	
Area(s) of spec	ializat	ion:	
		-	

If you are applying for Diplomate status, please complete the following items: List of any publications: Title **Publication Date** List of offices held in professional organizations: Organization Office **Dates** List of research accomplished (if any, must apply to vocational issues): Date Title Where Published Presentations to professional groups: Special awards and recognition:

Other distinguished performance:

List of teaching experience applicable to vocational issues:

Position	Institution		Dates		
List of References: If necessary, use additional paper. All three references must provide evidence of a reference to your involvement in forensic work i.e., preparation of expert opinions regarding vocational capacity in litigated matters and in giving expert testimony regarding these opinions.					
Name:		Phone:			
Email:					
Address:					
City:	State:	Zip):		
Name:		Phone:			
Email:					
Address:					
City:	State:	Zip):		
		Phone:			
Email:					
Address:	State:				
City:	State:	Zip).		
NOTE: You may provide more than three references, but the above three are required and must provide evidence to your experience in the courtroom, depositions, or evaluations for court purposes (e.g., Social Security hearings, personal injury trials, workers compensation appeals, divorce trials with occupational involvement, etc). WORK PRODUCT: Please provide a sample of your work, which clearly identifies your vocational forensic experience (e.g., a vocationally oriented report submitted for court hearings; copy of a deposition focused on job/occupational functioning; copy of testimony relevant to loss of earning capacity). It is not sufficient to provide a report that arises out of a non-litigated content. It must relate to a forensic matter. Please include four copies with your application.					
Print your name as you wish it to appear on certificate, if awarded:					
I, the undersigned, hereby make voluntary application to the American Board of Vocational Experts, (ABVE). I agree to be bound by the Code of Ethics adopted by AB VE if I am awarded certification and that failure to do so may result in suspension or revocation of my certification. I affirm that the information I have provided in this application is true and accurate. I agree to keep my professional activities in full compliance with all existing laws and not to junction beyond the limits of my competency. I further understand and agree that AB VE and its affiliates assume no responsibility for any of my activities and actions.					
Signed:		Date:			

	accept personal checi		ational Experts. This fee is ISA or Amex. This fee includes a	
☐ Check	☐Master Card	□Visa	☐ American Express	
Credit Card Number:				
Expiration Date:			CVV Code:	
Signature:				
Billing Address (if different than above)				
Please return to:	American Board of Attn: ABVE Certifi 3739 National Driv Raleigh, NC 27612	ication /e, Suite 202	perts	