

REGISTERED BEHAVIOR TECHNICIAN (RBT) RENEWAL

1/1/2021 – 12/31/2022

Please complete all information below. Include additional sheets if necessary. A \$70.00 renewal fee is required. Payment must be in the form of a check or money order that is payable to ADSD and mailed to: 3416 Goni Road, Building D Suite 132, Carson City, NV 89706

Registered Behavior Technician Information			
Name (Last, First, M.I.):			
State of NV Registration No. :		BACB Registration No. :	
Mailing Street Address:			
City:		State	Zip:
Phone:	Email:		
Employer/Company Name:			Phone:
Employer/Company Address:			
Supervisor(s) Information			
Supervisor(s):		State of NV License No. :	
Supervisor(s) BCBA/BCaBA No. :			
Employer/Company Name:			Phone:
Employer/Company Address:			

1. Do you have your original State of Nevada Aging and Disability Services Division registration certificate? YES NO

If no, you must submit a \$25 payment for a new certificate. **The State of Nevada Seal is NOT valid unless placed on the official certificate.**

2. Have you ever been convicted of a misdemeanor, gross demeanor, or felony, including Driving Under the Influence (DUI), or entered a plea of guilty or nolo contendere to a criminal offense? YES NO

If yes, explain:

3. Do you have an **active status** with the Behavior Analyst Certification Board (BACB)?

YES NO

If no, explain:

4. A \$70 fee for the biennium is required for RBT renewals. Due to the COVID-19 pandemic, Nevada's Governor has *temporarily* waived requiring fees under an emergency directive. Please indicate if you are including your fees with your renewal. If you are choosing to delay payment, then it will be the registrant's responsibility to send payment of \$70 within 60 days of the termination of Emergency Directive 011. If a registrant chooses to delay fees, then *no certificate or sticker will be provided* to the RBT until all registration and renewal fees are paid in full. **Failure to pay the full renewal fee within 60 days of the termination of the directive will result in suspension of registration in the state of Nevada and the ability to legally practice ABA in the state of Nevada.** Fees will not be prorated during this time.

I am enclosing my \$70 renewal fee. YES NO

If NO was selected:

I understand that by choosing to delay my fee of \$70, I will be responsible for submitting my renewal fee within 60 days of the termination of Emergency Declaration 011 YES

I affirm, under penalty of perjury, that all information supplied herein for my registration renewal is true, accurate and complete, and that I have not withheld, misrepresented, or falsely stated any information in relation to my criminal history or to my training, experience or fitness to practice as a Behavior Technician. I authorize the exchange of any information concerning all complaints adjudicated, stipulated, or pending against me with ADSD, licensing boards and professional associated. I understand such complaints may constitute grounds for disciplinary action by the board.

Signature _____ Date _____