What is the BACB?

“The Behavior Analyst Certification Board®, Inc. (BACB®) is a nonprofit 501(c)(3) corporation established in 1998 to meet professional credentialing needs identified by behavior analysts, governments, and consumers of behavior analysis services. The BACB adheres to the national standards for boards that grant professional credentials. The BACB certification procedures and content undergo regular psychometric review and validation, pursuant to a job analysis survey of the profession and standards established by content experts in the field.”

“The Behavior Analyst Certification Board's BCBA and BCaBA credentialing programs are accredited by the National Council for Certifying Agencies in Washington, DC. NCCA is the accreditation body of the Institute for Credentialing Excellence. The BACB is endorsed by the Association of Professional Behavior Analysts, the Association for Behavior Analysis International, Division 25 (Behavior Analysis) of the American Psychological Association, and the European Association for Behavior Analysis.”

“The BACB’s mission is to develop, promote, and implement an international certification program for behavior analyst practitioners. The BACB has established uniform content, standards, and criteria for the credentialing process that are designed to meet

1. The legal standards established through state, federal and case law;
2. The accepted standards for national certification programs; and
3. The "best practice" and ethical standards of the behavior analysis profession.”

“The Behavior Analyst Certification Board credentials practitioners at three levels. Individuals who wish to become Board Certified Behavior Analysts® (BCBA®) must possess at least a Masters Degree, have 225 classroom hours of specific Graduate-level coursework, meet experience requirements, and pass the Behavior Analyst Certification Examination. Persons wishing to be Board Certified Assistant Behavior Analysts® (BCaBA®) must have at least a Bachelors Degree, have 135 classroom hours of specific coursework, meet experience requirements, and pass the Assistant Behavior Analyst Certification Examination. Board Certified Behavior Analyst-Doctoral must be BCBAs with doctorate degrees and meet other criteria. BACB certificants must accumulate continuing education credit to maintain their credentials.”

Who are BCaBA’s?

“The BCaBA conducts descriptive behavioral assessments and is able to interpret the results and design ethical and effective behavior analytic interventions for clients. The BCaBA designs and oversees interventions in familiar cases (e.g., similar to those encountered during their training) that are consistent with the dimensions of applied behavior analysis. The BCaBA obtains technical direction from a BCBA for unfamiliar situations. The BCaBA is able to teach others to carry out interventions once the BCaBA has demonstrated competency with the procedures involved under the direct supervision of a BCBA. The BCaBA may assist a BCBA with the design and delivery of introductory level instruction in behavior analysis. It is mandatory that each BCaBA
practice under the supervision of a BCBA. Governmental entities, third-party insurance plans and others utilizing BCaBAs must require this supervision.”

**BACB requirements to sit for the exam to become a Board Certified Assistant Behavior Analyst (BCaBA)**

1. **Degree requirement:** bachelor’s degree (BA, BS, or BGS)
2. **Coursework:** 135 classroom hours of instruction in required content areas
   a. The coursework required for an Applied Behavioral Science (ABS) degree within the speciality area of Early Childhood Education and Intervention includes a course sequence approved by the BACB. See attached chart that lists the BACB approved courses and the hours in each content area for which each approved course fulfills.
3. **Experience requirements**
   a. The experience in the Early Childhood Education and Intervention practica fall under the “Supervised Independent Fieldwork” category.
   b. Applicants must complete 1000 hours of Supervised Independent Fieldwork in behavior analysis.
      i. The distribution of hours must be at least 10 hours per week but not more than 30 hours per week with a minimum of 3 weeks per month.
4. **Supervision requirements**
   a. Applicants must be supervised at least every 2 weeks for 5% of the total hours they spend in Supervised Independent Fieldwork. Total supervision must be at least 50 hours.
      i. Supervision in the Early Childhood Education and Intervention in the ABS department at KU will be conducted once per week. See task analysis for completing supervision and the supervision experience sheets below.

Go to [www.bacb.com](http://www.bacb.com) to obtain more information about becoming a BCaBA and to download experience supervision sheets.

**Additional KU requirements to obtain supervision for fieldwork experience in the Early Childhood Education specialty area in the ABS department at KU**

1. Complete three (3) consecutive semesters of practicum (Educare [ABSc 677/678], Sunnyside [ABSc 6765/676], Little Steps [ABSc 680], KEAP [ABSc 680], or Research [ABSc 679])
   a. Semesters **must** be consecutive (e.g., fall 2011, spring 2012, summer 2012)
   b. No more than two (2) semesters may be completed in one practicum placement. For example, you may complete 2 semesters of practicum in Little Steps and 1 semester of practicum in Sunnyside.
2. Submit a “BACB Supervision Request Application” (see below) to your practicum faculty supervisor requesting supervision. This must be completed **prior** to starting your first practicum experience semester.
3. Obtain approval by all faculty supervisors with whom you plan to complete your three semesters of practicum.
4. Supervision must begin at the beginning of the first of the three semesters. That is, students cannot request for supervision to be provided for experience time completed prior to approval of supervision.

**Faculty supervisors reserve the right to deny or suspend supervision at any time.**
BACB Supervision Request Application

Date: _______________________

Name: _______________________

Email address: _______________________

Faculty advisor: _______________________

Overall GPA: _________

Major GPA: _________

Courses completed in the ABS department (list course number):
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

List the three practica that you plan to complete and the semester in which you plan to complete those practica:

Practicum  Semester

_________________  ___________________  

_________________  ___________________  

_________________  ___________________  

Faculty approval signature: ________________________  Date: ___________________

Faculty approval signature: ________________________  Date: ___________________

Faculty approval signature: ________________________  Date: ___________________

Practicum student signature: ________________________  Date: ___________________
## University of Kansas ABS Department
### BACB Pre-Approved Course Content
### BCaBA

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course title</th>
<th>135 Content Hours Required</th>
<th>135 Content Hours Required</th>
<th>135 Content Hours Required</th>
<th>135 Content Hours Required</th>
<th>Total</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ethical considerations in behavior analysis (min. 10)</td>
<td>Definitions and characteristics &amp; principles, processing and concepts (min. 40)</td>
<td>Behavioral assessment &amp; selecting intervention outcome strategies (min. 25)</td>
<td>Experimental evaluation of interventions; measurement of behavior &amp; displaying and interpreting data (min. 20)</td>
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<tr>
<td>100</td>
<td>Introduction to principles of behavior</td>
<td>1</td>
<td>20</td>
<td>0</td>
<td>12</td>
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<td>304</td>
<td>The principles and procedures of behavior modification</td>
<td>3</td>
<td>3</td>
<td>6</td>
<td>8</td>
<td>25</td>
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<tr>
<td>308</td>
<td>Introduction to research on human behavior</td>
<td>5</td>
<td>25</td>
<td>15</td>
<td></td>
<td>45</td>
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<td>300</td>
<td>Behavioral treatment of children with autism</td>
<td>3</td>
<td>5</td>
<td>6</td>
<td>3</td>
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<tr>
<td>444</td>
<td>Curriculum development for young children</td>
<td>10</td>
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<tr>
<td>509</td>
<td>Contemporary Behavioral Science</td>
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<td>3</td>
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<td>Behavioral approaches in working with adolescents</td>
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<td>290</td>
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</tbody>
</table>
Task Analysis for the BACB Fieldwork and Practicum Experience Supervision Form

Below are the steps to fill out the BACB supervision forms. **Every week**, you will fill out a supervision form and indicate individual supervision and group supervision on alternating weeks. For example, if you fill out a form for individual supervision on Week 1, you will fill out a form for group supervision on Week 2, individual supervision on Week 3, group supervision on Week 4, etc. The order in which you fill out the forms (either group or individual supervision first) does not matter. Individual supervision will occur during your practicum shift. Group supervision will occur during the Tuesday night practicum meeting.

Specific Instructions for Completing Supervision Form:

1. Fill out the top section of the form:

   - **Supervisee:** ____________________________
   - **Supervisor:** ____________________________
   - **Date:** ____________________________
   - **Time Start:** ____________________________ **End:** ____________________________

   **This supervision session addresses the period from \( / / \) to \( / / \).**

   - **Group:** Date of practicum meeting within the 2-week period
   - **Individual:** Any date during the 2-week period

2. Check which type of supervision:

   - **Group supervision only**
   - **Individual supervision only**
   - **Individual and group supervision**

   **Check appropriate characteristics of supervision session. (✓ if yes)**

<table>
<thead>
<tr>
<th>Specific Client(s) Discussed</th>
<th>Client Privacy Protected</th>
<th>Group Supervision</th>
<th>Individual Supervision</th>
<th>Office Supervision</th>
<th>On-Site Supervision</th>
<th>Remote Supervision</th>
<th>Video Observation of Supervisee</th>
<th>In-Situ Observation of Supervisee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Check for both group and individual supervision**
- **Group supervision only**
- **Individual supervision only**
- **Individual and group supervision**

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Groups: CDC: 10. BACB: BCA BA Supervision: BCA BA info reqs for KU_revSpr12.docx
3. If readings (e.g., journal articles, teacher manual sections, research protocols, etc.) are suggested by your practicum supervisor or professor or discussed in supervision fill out section below. If not, leave blank.

Readings suggested by supervisor: ____________________________________________________________

Readings discussed in supervision: ___________________________________________________________

4. Check BACB task list items discussed in supervision section. These items may differ across group and individual supervision. Consult with your practicum supervisor on the relevant items to check.

**Check BACB task list items discussed in this supervision session.**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ethical Considerations</td>
</tr>
<tr>
<td>2</td>
<td>Definition and Characteristics</td>
</tr>
<tr>
<td>3</td>
<td>Principles, Processes, and Concepts</td>
</tr>
<tr>
<td>4</td>
<td>Behavioral Assessment</td>
</tr>
<tr>
<td>5</td>
<td>Experimental Evaluation of Interventions</td>
</tr>
</tbody>
</table>

5. Your practicum supervisor will fill out the remaining section (i.e., checks of professional integrity section and overall performance) of the supervision form. **It is your responsibility to fill out the form and present it to your practicum supervisor.** The form should be given to your practicum supervisor prior to the supervision time. Additionally, you should alert your practicum supervisor when you are requesting individual supervision. Following supervision (group or individual), your practicum supervisor will review the supervision form with you and you will be required to sign the form. The form should also be signed by your practicum supervisor (if they are a BCBA) or your faculty supervisor (if your practicum supervisor is not a BCBA).
Assurance of Agreement with the Requirements for BACB Supervised Fieldwork Experience at KU

My signature on the line below affirms that I (a) have read and fully understand the BCaBA Information & Requirements document provided to me during practicum orientation and agree to abide by the requirements outlined below in order to receive BCBA supervision during my CDC practicum experience at KU:

1. Complete **three** semesters of practicum (Educare [ABSc 677/678], Sunnyside [ABSc 6765/676], Little Steps [ABSc 680], KEAP [ABSc 680], or Research [ABSc 679])
   a. Semesters must be consecutive (e.g., fall 2011, spring 2012, summer 2012)
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**Faculty supervisors reserve the right to deny or suspend supervision at any time.**

______________________________________________
Printed name

________________________________________________________  ____________________
Signature                           Date