



STATE OF NORTH CAROLINA
BOARD OF EXAMINERS FOR SPEECH AND LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS
PO Box 16885, Greensboro, NC 27416-0885

Telephone: 336-272-1828 Email: kyoung@nchoeslpa.org Website: www.nchoeslpa.org

Audiology Assistant Registration Renewal

Name of Audiology Assistant: _____

Mailing Address Line 1: _____

Mailing Address Line 2: _____

City: _____ State: _____ Zip Code: _____

Home Telephone: _____ Assistant Email Address: _____

Employer: _____

Primary Supervisor: _____

Business Address Line 1: _____

Business Address Line 2: _____

City: _____ State: _____ Zip Code: _____

Work Telephone: _____ Primary Supervisor Email Address: _____

Secondary Supervisor: _____

Exact worksite addresses where Audiology Assistant will provide services:

Signature of Primary Supervisor: _____

The registration renewal fee is \$40.00 if paying by check or money order, for online payments a convenience charge is applied. If there are any changes in the primary or secondary supervisor for an Audiology Assistant, a new registration form is required. If a supervision change is made after this renewal is paid and before the next renewal is due, the fee to make the change is \$20.00 if paying by check or money order, for online payments a convenience charge is applied.

****Please note that the Board is no longer sending out Assistant Registration Certificates. The certificates are now available through the Primary Supervisors Portal once the registration is completed.****