



## KENTUCKY APPLIED BEHAVIOR ANALYSIS LICENSING BOARD

P.O. Box 1360, Frankfort, Kentucky 40602

500 Mero St. 2SC 32, Frankfort, Kentucky 40601 (Overnight Delivery Only)

Phone: (502) 892-4249

Fax: (502) 564-4818

<http://aba.ky.gov>

### License Type:

- ☐ Licensed Assistant Behavior Analyst (LaBA)  
☐ Temporary Licensed Behavior Analyst (TLBA)  
☐ Temporary Licensed Assistant Behavior Analyst (TLaBA)  
☐ Trainee  
☐ Disciplined Licensed Holder-Board Liaison: \_\_\_\_\_

SUPERVISORY RECORD PERIOD: \_\_\_\_\_

## ANNUAL REPORT OF SUPERVISION

### SUPERVISOR INFORMATION

1.

Name: Last First Middle Initial Social Security Number

Mailing Address: Street City State Zip Code

Home Phone Work Phone Mobile Phone Email Address

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

BACB Certification Number: \_\_\_\_\_

Date of Initial BACB Certification: \_\_\_\_\_

BACB Certification Status: ☐ Active ☐ Inactive

Kentucky ABA License Number: \_\_\_\_\_

### SUPERVISEE INFORMATION

2.

Name: Last First Middle Initial Social Security Number

Mailing Address: Street City State Zip Code

Home Phone Work Phone Mobile Phone Email Address

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

BACB Certification Number: \_\_\_\_\_

Date of Initial BACB Certification: \_\_\_\_\_

BACB Certification Status: ☐ Active ☐ Inactive

Kentucky ABA License Number: \_\_\_\_\_



## KENTUCKY APPLIED BEHAVIOR ANALYSIS LICENSING BOARD

P.O. Box 1360, Frankfort, Kentucky 40602

500 Mero St. 2SC 32, Frankfort, Kentucky 40601 (Overnight Delivery Only)

Phone: (502) 892-4249

Fax: (502) 564-4818

<http://aba.ky.gov>

### FREQUENCY, FORMAT AND DURATION OF SUPERVISION

**3. For a Licensed Assistant Behavior Analyst with at least five (5) years of full-time, post-certification practice**

a. Supervision was performed one (1) hour per month every month of the supervision year: \_\_\_\_\_

☐ Yes ☐ No **if no, please explain:**

---

---

---

---

b. Format of Supervision: \_\_\_\_\_

c. At least one contact supervision session per month was conducted:

☐ Yes ☐ No **if no, please explain:**

---

---

---

---

d. At least one (1) contact supervision session was conducted every three (3) months:

☐ Yes ☐ No **if no, please explain:**

---

---

---

---

**4. For Licensed Assistant Behavior Analyst with less than five (5) years of full-time, post-certification practice:**

a. Supervision was performed two (2) hours per month, every month of the supervision year: \_\_\_\_\_

☐ Yes ☐ No **if no, please explain:**

---

---

---

b. Format of Supervision: \_\_\_\_\_

c. At least one (1) contact supervision per month was conducted:

☐ Yes ☐ No **if no, please explain:**

d. Other Board approved supervision arrangements were conducted:



## KENTUCKY APPLIED BEHAVIOR ANALYSIS LICENSING BOARD

P.O. Box 1360, Frankfort, Kentucky 40602

500 Mero St. 2SC 32, Frankfort, Kentucky 40601 (Overnight Delivery Only)

Phone: (502) 892-4249

Fax: (502) 564-4818

<http://aba.ky.gov>

**Explain:**

---

---

---

---

### 5. For a Disciplined License Holder

- a. Supervision was performed weekly for one (1) hour face to face

☐ Yes ☐ No **If no, please explain:**

---

---

---

---

- b. Other Board approved supervision arrangements were conducted:

**Explain:**

---

---

---

---

### 6. Professional Evaluation of Supervised Licensee

#### Foundations in Applied Behavior Analysis

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

#### Ability to conceptualize and analyze cases

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

#### Functional analysis skills

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

**Developing effective and well-designed behavior support plans and other intervention strategies**



## KENTUCKY APPLIED BEHAVIOR ANALYSIS LICENSING BOARD

P.O. Box 1360, Frankfort, Kentucky 40602

500 Mero St. 2SC 32, Frankfort, Kentucky 40601 (Overnight Delivery Only)

Phone: (502) 892-4249

Fax: (502) 564-4818

<http://aba.ky.gov>

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

### Overall professional practice and intervention skills

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

### Ability to communicate with clients, parents, caregivers at their level and avoid overuse of unnecessary professional jargon

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

### Ability to communicate with and work effectively with professional colleagues

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

### Ability to effectively manage time and caseload responsibilities

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

### Ability to produce well-written reports, assessments, plans and documentation

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

### Ability to utilize consultation and supervisory opportunities effectively

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

### Ability to conduct practice in a professional, legal and ethical manner

Exceptional	Satisfactory	Marginal	Unsatisfactory	N/A
4	3	2	1	

**\* Ratings below Satisfactory (3) MUST be addressed in the next Supervisory Plan\***



## KENTUCKY APPLIED BEHAVIOR ANALYSIS LICENSING BOARD

P.O. Box 1360, Frankfort, Kentucky 40602

500 Mero St. 2SC 32, Frankfort, Kentucky 40601 (Overnight Delivery Only)

Phone: (502) 892-4249

Fax: (502) 564-4818

<http://aba.ky.gov>

7. Assessment (including strengths, weaknesses, and assessment methods employed):

---

---

---

---

---

8. Professional traits rated less than satisfactory on the Annual Report of Supervision that will be addressed in supervision (if applicable):

---

---

---

---

---

9. Other professional skills needing further development:

---

---

---

---

---

10. Is the supervised licensee currently applying to become a Licensed Behavior Analyst (LBA)?

☐ Yes ☐ No

11. If yes, do you recommend this individual for unsupervised practice as a Licensed Behavior Analyst (LBA)?

☐ Yes ☐ No

12. Do you have more than one (1) supervisor?

☐ Yes ☐ No

If yes, please submit an annual report of supervision for each supervisor.

**Other Comments:**

---

---

---



## KENTUCKY APPLIED BEHAVIOR ANALYSIS LICENSING BOARD

P.O. Box 1360, Frankfort, Kentucky 40602

500 Mero St. 2SC 32, Frankfort, Kentucky 40601 (Overnight Delivery Only)

Phone: (502) 892-4249

Fax: (502) 564-4818

<http://aba.ky.gov>

\_\_\_\_\_  
**Supervisor**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Supervisee**

\_\_\_\_\_  
**Date**

### For Board Use Only

Date Plan Received: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Comments and/or Follow-up

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_