

APPLICATION FOR NEW SPEAKER APPROVAL

American Board of Opticianry _____ National Contact Lens Examiners _____
(Please check ABO or NCLE)

Guidelines for filling out this form are in the Criteria for Continuing Education Handbook

Name: _____ Date: _____ S.S. # (last 4 digits): _____

Company: _____ Position/Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Requested Speaker Classification: Technical _____ General Knowledge _____

Technical courses are those that relate directly to skills or knowledge that are optical in nature, and appear in the ABO or NCLE Job Analysis. General Knowledge courses are those that will enhance the abilities of ophthalmic professionals, but are usually not optical in nature.

Requested Speaker Level (technical speakers only):

Level I (basic) and/or Level II (intermediate) _____ Level III (advanced) _____

Technical course speakers must be currently ABO and/or NCLE certified, or be ophthalmic/optometric certified allied health personnel, or have credentials in optometry, medicine, or nursing. Level III (advanced) course speakers must have ABO and/or NCLE – Advanced Level certification or other applicable advanced degree(s). Anyone who does not meet these requirements may request a special review (check here _____).

Please attach an updated resume or curriculum vita that includes: education, work experience, teaching and/or speaking experience, specialized training and certifications.

I agree that approved course content will be presented in a generic and objective manner. Specific brand names will be avoided in word, slide and study materials. Brand names will only be listed if names of all similar brands available in the industry are also listed.

Signature of Applicant

Date

A \$50.00 NON-REFUNDABLE APPLICATION FEE IS REQUIRED WITH SUBMISSION OF THIS FORM. LATE FEES MAY APPLY. ALL SPEAKERS ARE APPROVED FOR A PERIOD OF THREE YEARS. BY DEC. 31ST OF THE THIRD YEAR OF APPROVAL SPEAKERS SHOULD SUBMIT A RENEWAL APPLICATION AND A \$50.00 NON-REFUNDABLE FEE FOR RENEWAL OF SPEAKER STATUS.

Mail application to: ABO/NCLE, 6506 Loisdale Road, Suite 330, Springfield, VA 22150