



# New Jersey Office of the Attorney General

Division of Consumer Affairs  
State Board of Applied Behavior Analyst Examiners  
124 Halsey Street, 6th Floor, P.O. Box 45017  
Newark, New Jersey 07101  
[behavioranalyst@dca.njoag.gov](mailto:behavioranalyst@dca.njoag.gov)



## Supervisory Form for Licensed Assistant Applied Behavior Analyst

**Instructions:** Section I is to be completed by the applicant and provided to your supervisor to complete Section II. If you have more than one supervisor, a form should be completed for each supervisor. Once complete, the form should be sent to the Board's email by the Supervisor.

### I. Supervisee Information:

Applicant's name: \_\_\_\_\_  
First name Last name Middle initial

Applicant's address: \_\_\_\_\_  
Street address City State ZIP code

### II. Supervisor's Information

1) Name: \_\_\_\_\_  
First name Last name Middle initial

2) Address: \_\_\_\_\_  
Street address City State ZIP code

3) Telephone number: \_\_\_\_\_  
include area code

4) Licensed Behavior Analyst in New Jersey?

a)  Yes  No

b) Year licensed: \_\_\_\_\_

c) License number: \_\_\_\_\_

5) Have you completed an eight-hour training course that covers the BACB Supervisor Training Curriculum Outline (2.0), published by the BACB, as required by N.J.A.C. 13:42B-5.1(b)? A certificate of completion must be attached with form submission.  Yes  No

## Supervising Applied Behavior Analyst's Affidavit

I, the supervising Licensed Behavior Analyst, has read the regulation N.J.A.C. 13:42B-5.1 and accept the responsibility for its implementation and I certify that the forgoing statements made by me are true. I am aware that if any of the statements made by me are willfully false, I am subject to disciplinary action.

I also verify that I am a licensed behavior analyst in the State of New Jersey and that my license is in good standing.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of supervisor

**Note:** Any changes in supervision should be reported to the Board via email at: [behavioranalyst@dca.njoag.gov](mailto:behavioranalyst@dca.njoag.gov)