



ABVE Certification

Dear Applicant:

Thank for your inquiry regarding the American Board of Vocational Experts. ABVE has set forth the following formalized standard for identifying persons for board certification as Vocational Experts. The person must:

- A) Be a current ABVE Associate Member
- B) Hold a Master's or Doctorate degree from an accredited institution in human service field specializing in vocational rehabilitation, psychology, vocational counseling, etc.;
- C) Have specific training and experience in such areas as assessment, functional capacity measures, psychological testing and measurement, job analysis, job placement, job surveys, and have experience providing testimony in these areas;
- D) Display knowledge and expertise within a submitted forensic work product; and,
- E) Attain a passing score on the ABVE examination.

FELLOW status requires three years of documented experience in assessment of vocational capacity and vocational expert forensics in addition to the requirements listed above.

DIPLOMATE status requires seven years of documented experience in the area of assessment of vocational capacity and vocational expert opinion and demonstration of distinguished performance or recognition as a vocational expert, in addition to the above requirements. This might include the following: published works; leadership position in a professional organization; presentation of papers at professional organization; presentation of papers at professional seminars; and/or sitting on study groups or legislative committees to enhance the professionalism of an organization.

To be considered for certification, you must meet the above criteria and submit your application with accompanying documents requested. **The application fee of \$225 is nonrefundable.** References should be individuals who can attest to the applicant's knowledge in forensics work, and they should be attorneys, judges, insurance companies or other referral sources who have utilized the candidate in this regard. **Supervisors or co-workers are not acceptable.**

When headquarters receives your completed application, it will be reviewed by the Credentials Peer Review Committee. **If you pass peer review, you will be invited to sit for the exam.** On completion of the exam, you will be notified of the Committee's recommendations. If you have any questions, please feel free to contact our corporate office at (831) 464-4890, and speak to Membership Services.

Completed applications shall contain:

1. A completed application with non-refundable payment.
2. College Transcripts in a sealed envelope from the institution rendering the degree(s).
3. CV and/or resume.
4. 3 Letters of reference each in a sealed envelope.
5. Work product - redacted
6. Signed Code of Ethics.

All forms received shall be in a legible status, written in English or they will be returned to the applicant.

Any questions may be directed Richard (Dick) Baine, Credentialing Chair at rjbainemarminc@earthlink.net.



AMERICAN BOARD OF VOCATIONAL EXPERTS
3540 Soquel Ave., Suite A Santa Cruz, CA 95062
Phone: (831) 464-4890 Fax: (831) 576-1417
E-mail abve@abve.net *Web site* <http://www.abve.net>
Revised July 2007

Education:

Dates Attended	Institution	Degree Earned

Professional affiliations: *(Please identify any offices held, past or present.)*

Have you ever had a certificate, license, or other professional credential suspended or revoked or have you been expelled from membership from any organization? Yes No

If yes, please list reason and date:

Have you ever been convicted of a felony? Yes No *If yes, please list reason and date.*

Current valid licenses and/or certifications:

Date	Type or Level

Area(s) of specialization:

If you are applying for Diplomate status, please complete the following items:

List of any publications:

Date	Title	Publication

List of offices held in professional organizations:

Office	Organization	Dates

List of research accomplished (*if any, must apply to vocational issues*):

Date	Title	Where Published

Presentations to professional groups:

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Special awards and recognition:

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Other distinguished performance:

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List of teaching experience applicable to vocational issues:

Position	Institution	Dates

List of References: If necessary, use additional paper. All three references must provide evidence of a reference to your involvement in forensic work i.e., preparation of expert opinions regarding vocational capacity in litigated matters and in giving expert testimony regarding these opinions.

Name: _____ Phone: _____		
Email: _____		
Address: _____		
City: _____	State _____	Zip: _____
:		
Name: _____ Phone: _____		
Email: _____		
Address: _____		
City: _____	State _____	Zip: _____
:		
Name: _____ Phone: _____		
Email: _____		
Address: _____		
City: _____	State _____	Zip: _____
:		

NOTE: You may provide more than three references, but the above three are required and must provide evidence to your experience in the courtroom, depositions, or evaluations for court purposes (e.g., Social Security hearings, personal injury trials, workers compensation appeals, divorce trials with occupational involvement, etc).

WORK PRODUCT: Please provide a sample of your work, which clearly identifies your vocational forensic experience (e.g., a vocationally oriented report submitted for court hearings; copy of a deposition focused on job/occupational functioning; copy of testimony relevant to loss of earning capacity). It is not sufficient to provide a report that arises out of a non-litigated content. It must relate to a forensic matter. ***Please include four copies with your application.***

Print your name as you wish it to appear on certificate, if awarded:

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I, the undersigned, hereby make voluntary application to the American Board of Vocational Experts, (AB VE). I agree to be bound by the Code of Ethics adopted by AB VE if I am awarded certification and that failure to do so may result in suspension or revocation of my certification. I affirm that the information I have provided in this application is true and accurate. I agree to keep my professional activities in full compliance with all existing laws and not to junction beyond the limits of my competency. I further understand and agree that AB VE and its affiliates assume no responsibility for any of my activities and actions.

Signed: _____ **Date:** _____

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*Application fee of \$225 issued to **American Board of Vocational Experts**. This fee is non-refundable. We accept personal check, MasterCard, VISA or Amex. This fee includes a processing fee and your annual dues.*

Check

Master Card

Visa

American Express

Credit Card Number: _____

Expiration Date: _____

Signature: _____

Please return to:

**American Board of Vocational Experts
Attn: ABVE Certification
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Santa Cruz, CA 95062**

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