

# AAC Post Master's Specialization Application Form

Administrative Use Only

~~☒~~ Letter of interest  
~~☒~~ Part 1  
~~☒~~ Part 2  
~~☒~~ Resume  
~~☒~~ Interview

Name:

Date:

Address:

Home Phone:

Work Phone:

Email:

Instructions: Complete the following packet; please type your responses or reproduce this form on your computer. Attach a copy of your current resume.

## **PART 1**

1. What is your current job title and work setting?
  
  
  
  
  
  
  
  
  
  
2. As an AAC practitioner, do you consider yourself:
  - ~~☒~~ A complete novice
  - ~~☒~~ At the beginner level
  - ~~☒~~ At the intermediate level
  - ~~☒~~ At the advanced level
  - ~~☒~~ An expert

3. List AAC-related courses you have previously taken in the table below.

COURSE TOPIC	SPONSORING AGENCY	CE OR GRADUATE CREDIT?	YEAR TAKEN

4. Check all populations with whom you've worked.

- ALS
- Aphasia
- Apraxia
- Autism/pdd
- Cerebral palsy
- Cognitive impairment
- Developmental disability
- Dual sensory impairment-hearing and vision loss
- Dysarthria
- Locked in syndrome
- Multiple disabilities-cognitive and physical
- Muscular dystrophy
- Severe-profound mental retardation
- Spina bifida
- Spinal cord injury
- TBI
- Other AAC-related (specify)

5. Of the populations checked off in the previous question, list those in which you want to develop (additional) AAC skills with.

6. Check any organizations of which you are a member.

- AAMR
- ASHA DIVISION ON AAC
- CEC
- FSAAC
- ISAAC
- RESNA
- USSAAC
- Other AAC-related organization (specify)

7. Indicate your level of familiarity with each of the following pieces of AAC equipment.

AAC EQUIPMT.	NOT FAMILIAR W/ IT	KNOW WHAT IT IS, BUT HAVEN'T USED IT	USE(D) IT AT A BEGINNER LEVEL	USE(D) IT AT AN INTER-MEDIATE LEVEL	USE(D) IT AT AN ADVANCED LEVEL
ALPHA-TALKER					
BIG MACK					
BLACK HAWK					
BOARD-MAKER					
CHATBOX					
COWRITER					
DELTA-TALKER					
DIGIVOX					
DYNAVOX DYNAMYTE					
EASY TALK					
EYE GAZE BOARDS					
EZ KEYS					
FREESTYLE					
GUS					
HAWK SUPERHAWK					
INTELLI-KEYS					
LIBERATOR					

AAC EQUIPMT.	NOT FAMILIAR W/ IT	KNOW WHAT IT IS, BUT HAVEN'T USED IT	USE(D) IT AT A BEGINNER LEVEL	USE(D) IT AT AN INTER-MEDIATE LEVEL	USE(D) IT AT AN ADVANCED LEVEL
LIGHT-WRITER					
LYNX					
MACAW					
MESSAGE MATE					
ONE STEP					
PARROT					
PEGASUS					
POCKET TALKER					
SAY IT ALL					
SAY IT SIMPLY					
SCAN IT ALL					
SCAN MATE					
STEP BY STEP					
SWITCHES					
VANGUARD					
VOICEMATE					
WOLF					
WRITE OUTLOUD					

8. Describe an experience you have had where you felt you made an impact on the life of an individual who had a severe communication impairment.

9. Describe yourself as a learner. What are your strengths and weaknesses? What strategies do you use to learn new information?
  
  
  
  
  
  
  
  
  
  
10. What three words would your most vehement adversaries use to describe you?
  
  
  
  
  
  
  
  
  
  
11. List any languages that you speak or sign.
  
  
  
  
  
  
  
  
  
  
12. In 100 words or less, explain how participation in the AAC Post-Master's Specialization Program would impact your career.

## PART 2

Through my signature below, I acknowledge that I understand the requirements of the AAC Post Master's Specialization Program. Specifically, I will attend 4 weekend classes on AAC topics and successfully complete the required projects for each class. Following successful completion of these classes, I will participate in a Case Study Seminar in which I will complete a case study on an AAC user or situation to demonstrate my ability to apply information gleaned during classes to the clinical/educational practice of AAC. I understand that a designated faculty member will provide me with feedback on drafts of my case study, and that, when completed this case study will form the basis of my presentation at an AAC Grand Rounds Workshop. If I am accepted into the AAC Post Master's Specialization Program and agree to participate as in it, I will abide by all program requirements. I am aware that my participation in the AAC Post-Master's Specialization Program may be terminated if I do not fulfill these requirements.

I understand that the fee for each AAC topic course is \$300.00 and \$500.00 for the Case Study Seminar. There is no fee for participation in the AAC Grand Rounds Workshop. I understand that the Programs in Communication Sciences and Disorders will apply for 1.2 ASHA CEUs for each AAC topic course. I understand that acceptance to the AAC Post Master's Specialization Program does not constitute acceptance into a graduate degree program in Communication Sciences and Disorders.

If accepted into the AAC Post Master's Specialization Program, I consent to have my name and photograph used by Nova Southeastern University in program announcements and reporting documents. I understand that selected case studies may appear in a monograph and consent to such publication.

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(Name)

(Date)

Return the completed application packet with a) letter of interest, and, b) current resume to:  
Dr. Carole Zangari  
Communication Sciences and Disorders-Westport  
3301 College Avenue  
Fort Lauderdale, FL 33314.

**Questions? Contact Dr. Zangari at 954/262-7706 or [zangaric@fcae.nova.edu](mailto:zangaric@fcae.nova.edu).**