

# Wisconsin Department of Safety and Professional Services

Office Location: 4822 Madison Yards Way  
Madison, WI 53705  
Phone Number: (608) 266-2112

LicensE Portal: <https://license.wi.gov/>  
Email: [dsps@wisconsin.gov](mailto:dsps@wisconsin.gov)  
Website: <http://dsps.wi.gov>

## HEARING AND SPEECH EXAMINING BOARD

### CREDENTIALING INFORMATION FOR AUDIOLOGY APPLICANTS

#### LICENSURE BY EXAMINATION:

1. **LicensE Application** Complete the audiology application and submit fee(s) online.
2. **Certificate of Professional Education** Have your school submit (**Form #1985**) to certify completion of required education.
3. **Audiology (AUD) Practical Exam** An applicant shall pass a practical exam that consists of two (2) parts: Audiometric and Ear Mold. The practical exam is designed to test the applicant's proficiency in the techniques and procedures described in Wis. Admin. Code § [HAS 6.04\(8\)](#).
4. **Verification of licensure in other states** You are required to have each state board in which you have ever been licensed, submit letters of verification to the Wisconsin Hearing and Speech Examining Board. The letters must indicate your date of birth, license number, date of issuance, a statement regarding disciplinary actions and whether the license was issued by examination in that state. These letters will be required to complete your application for licensure.

#### INSTRUCTIONS FOR TEMPORARY LICENSE:

An applicant who meets all requirements for examination may be granted a temporary license to practice Audiology for a period of one (1) year. You must have taken and passed the practical examination prior to the expiration of your permit.

This license allows you to gain experience prior to taking the practical examination. Applicants must apply under the supervision of a licensed Wisconsin Audiologist who is **not** supervising another trainee.

Applicants for a temporary license shall provide the Board with the following:

1. **LicensE Application** Complete the audiology application and submit fees, including temporary trainee license fee, online.
2. **Certificate of Professional Education (Form #1985)** Your school must certify completion of the required education. This form must come directly from your school to the Department.
3. **Examination Fee**
4. **Temporary License Request to Practice Audiology (Form #1980)**

#### DEADLINE DATES: (for examination and reciprocity applicants)

Applications and all supporting documents must be complete and on file in the board office 30 days prior to the date of examination and Board meeting.

#### EXAMINATION AND BOARD MEETING DATES:

Examinations and Board meetings dates can be found on our website using the following link:

<https://dsps.wi.gov/Pages/Professions/Audiologist/Exams.aspx>.

#### LICENSURE BY RECIPROCITY:

Applicants who hold a current audiologist license in another state or territory of the United States may apply for a Wisconsin license by reciprocity (Wis. Stat. § [459.28](#)). License must remain active during the Wisconsin reciprocal credentialing process.

1. **LicensE Application** Complete the audiology application and submit fee(s) online.
2. **Certificate of Professional Education (Form #1985)** Your school must certify completion of the required education. This form must come directly from your school to the Department.
3. **Verification of Licensure in Other States** You are required to have each state board in which you have ever been licensed submit letters of verification to the Wisconsin Hearing and Speech Examining Board. The letters must indicate your date of birth, license number, date of issuance, a statement regarding disciplinary actions, and whether license was issued by examination in that state. These letters will be required in order to complete your application for licensure.

#### **APPLICATION IS NOT COMPLETE UNTIL ALL OF THE FOLLOWING DOCUMENTS HAVE BEEN RECEIVED:**

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|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Complete application and pay applicable fee(s) online via LicensE                                         | <input type="checkbox"/> Certificate of Professional Education ( <b>Form #1985</b> )                                                                                      |
| <input type="checkbox"/> Verification of certification from the American Speech-Language Hearing Association ( <b>Form #1977</b> ) | <input type="checkbox"/> Malpractice Suits or Claims ( <b>Form #2829</b> ) and copies of malpractice suit, court documents with allegations and settlement, if applicable |
| <input type="checkbox"/> Letters from all State Boards where licensed, active and inactive                                         | <input type="checkbox"/> Is name on all credentials the same? If not, submit certified copy of marriage certificate, divorce decree, etc.                                 |
| <input type="checkbox"/> Convictions and Pending Charges ( <b>Form #2252</b> ), if applicable                                      |                                                                                                                                                                           |