Communication Sciences and Disorders
College of Education
P.O. Box 3091
777 Glades Road
Boca Raton, FL 33431-0991

Department: 561-297-6074
Clinic: 561-297-2258
FAX: 561-297-2268



DEPARTMENT OF COMMUNICATION SCIENCES AND DISORDERS

GRADUATE PROGRAM POLICY AND PROCEDURES MANUAL

Effective: August 2026 – August 2028

TABLE OF CONTENTS

ASHA CODE OF ETHICS Page 4

POLICY OF NONDISCRIMINATION Page 10

MISSION STATEMENTS: Page 10
FLORIDA ATLANTIC UNIVERSITY
COLLEGE OF EDUCATION
DEPARTMENT OF COMMUNICATION SCIENCES AND DISORDERS

STUDENTS WITH DISABILITIES Page 11

POLICY ON GRADUATE STUDENTS WHO SPEAK ENGLISH WITH ACCENTS AND DIALECTS Page 12

I. ACADEMIC POLICIES AND PROCEDURES
- I-A. Prerequisite Course Work Page 13
- I-B. Transfer of Graduate Credit Page 14
  - University Policy
  - Department Policy
- I-C. Graduate Course Work Page 15
  - Comprehensive Examination Page 16
  - Thesis/Non-Thesis Option Guide Page 18
- I-D. Graduate Course Rotations
  - Full-time Rotation Page 19
  - Part-time Rotations Page 19
- I-E. Electives Petition Process Page 20
- I-F. Attendance Policy Page 20
- I-G. Grading System Page 21
- I-H Critical Assignment Policy Page 21
- I-I. Livetext Page 22
- I-J. Welcoming Environment Page 22
- I-K. Support Plans for Struggling Students Page 22
- I-L. Plagiarism & Cheating Department Policy
  - University: Honor Code, Academic Irregularities, and Students' Academic Grievances Page 23
- I-M. Requirements for Graduation Page 25
  - Degree Decision Points Page 27

II. CLINICAL POLICIES AND PROCEDURES
- II-A. General Page 29
- II-B. Requirements for On-Campus Clinical Practicum Page 29
  - Policy: Consecutive Sessions of Clinic (SPA 6505) Page 29
- II-C. Requirements for Off-Campus Practicum Page 31
- II-D. Establishment of Relationships with External Facilities Page 32
- II-E. Procedures to assure competency in all clinical areas Page 33
- II-F. Verification of Supervisors Page 34

III. THE K-9 (Knowledge and Skills Assessment-KASA)
- III-A. Overview Page 35
- III-B. Department Goals & Objectives Page 35

IV. MISCELLANEOUS

IV-A.	Requesting exceptions to policies and procedures	Page 36
IV-B.	Process for complaints to or against Council on Academic Accreditation	Page 37
	Complaints Against Graduate Education Programs	Page 37
	Complaints Against CAA	Page 38
IV-C.	University Policy – Exceptional Circumstance Withdrawal	Page 40
IV-D.	University Policy – Religious Accommodation	Page 41
IV-E.	University Graduate Grading Policy	Page 41
IV-F.	University Policy – Graduate Programs	Page 41
	Satisfactory Academic Performance	Page 41
	Dismissal	Page 41
IV-G	University Policy – Continuous Enrollment	Page 42
IV-H.	University Policy – Sexual Harassment	Page 42

V. ASHA AND CERTIFICATION REQUIREMENTS Page 45

Appendix A Page 53

ASHA – CODE OF ETHICS

Code of Ethics

Preamble

The American Speech-Language-Hearing Association (ASHA; hereafter, also known as "The Association") has been committed to a framework of common principles and standards of practice since ASHA's inception in 1925. This commitment was formalized in 1952 as the Association's first Code of Ethics. This Code has been modified and adapted as society and the professions have changed. The Code of Ethics reflects what we value as professionals and establishes expectations for our scientific and clinical practice based on principles of duty, accountability, fairness, and responsibility. The ASHA Code of Ethics is intended to ensure the welfare of the consumer and to protect the reputation and integrity of the professions.

The ASHA Code of Ethics is a framework and focused guide for professionals in support of day-to-day decision making related to professional conduct. The Code is partly obligatory and disciplinary and partly aspirational and descriptive in that it defines the professional's role. The Code educates professionals in the discipline, as well as students, other professionals, and the public, regarding ethical principles and standards that direct professional conduct.

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by audiologists, speech-language pathologists, and speech, language, and hearing scientists who serve as clinicians, educators, mentors, researchers, supervisors, and administrators. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose and is applicable to the following individuals:

- a member of the American Speech-Language-Hearing Association holding the Certificate of Clinical Competence (CCC)
- a member of the Association not holding the Certificate of Clinical Competence (CCC)
- a nonmember of the Association holding the Certificate of Clinical Competence (CCC)
- an applicant for certification, or for membership and certification

By holding ASHA certification or membership, or through application for such, all individuals are automatically subject to the jurisdiction of the Board of Ethics for ethics complaint adjudication. Individuals who provide clinical services and who also desire membership in the Association must hold the CCC.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics. The four Principles of Ethics form the underlying philosophical basis for the Code of Ethics and are reflected in the following areas: (I) responsibility to persons served professionally and to research participants, both human and animal; (II) responsibility for one's professional competence; (III) responsibility to the public; and (IV) responsibility for professional relationships. Individuals shall honor and abide by these Principles as affirmative obligations under all conditions of applicable professional activity. Rules of Ethics are specific statements of minimally acceptable as well as unacceptable professional conduct.

The Code is designed to provide guidance to members, applicants, and certified individuals as they make professional decisions. Because the Code is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow the written provisions and to uphold the spirit and purpose of the Code. Adherence to the Code of Ethics and its enforcement results in respect for the professions and positive outcomes for individuals who benefit from the work of audiologists, speech-language pathologists, and speech, language, and hearing scientists.

Terminology

ASHA Standards and Ethics
: The mailing address for self-reporting in writing is American Speech-Language-Hearing Association, Standards and Ethics, 2200 Research Blvd., #313, Rockville, MD 20850.

advertising
: Any form of communication with the public about services, therapies, products, or publications.

conflict of interest
: An opposition between the private interests and the official or professional responsibilities of a person in a position of trust, power, and/or authority.

crime

Any felony; or any misdemeanor involving dishonesty, physical harm to the person or property of another, or a threat of physical harm to the person or property of another. For more details, see the "Disclosure Information" section of applications for ASHA certification found on www.asha.org/certification/AudCertification/ and www.asha.org/certification/SLPCertification/.

diminished decision-making ability

Any condition that renders a person unable to form the specific intent necessary to determine a reasonable course of action.

fraud

Any act, expression, omission, or concealment—the intent of which is either actual or constructive—calculated to deceive others to their disadvantage.

impaired practitioner

An individual whose professional practice is adversely affected by addiction, substance abuse, or health-related and/or mental health–related conditions.

individuals

Members and/or certificate holders, including applicants for certification.

informed consent

May be verbal, unless written consent is required; constitutes consent by persons served, research participants engaged, or parents and/or guardians of persons served to a proposed course of action after the communication of adequate information regarding expected outcomes and potential risks.

jurisdiction

The "personal jurisdiction" and authority of the ASHA Board of Ethics over an individual holding ASHA certification and/or membership, regardless of the individual's geographic location.

know, known, or knowingly

Having or reflecting knowledge.

may vs. shall

May denotes an allowance for discretion; shall denotes no discretion.

misrepresentation

Any statement by words or other conduct that, under the circumstances, amounts to an assertion that is false or erroneous (i.e., not in accordance with the facts); any statement made with conscious ignorance or a reckless disregard for the truth.

negligence

Breaching of a duty owed to another, which occurs because of a failure to conform to a requirement, and this failure has caused harm to another individual, which led to damages to this person(s); failure to exercise the care toward others that a reasonable or prudent person would take in the circumstances or taking actions that such a reasonable person would not.

nolo contendere

No contest.

plagiarism

False representation of another person's idea, research, presentation, result, or product as one's own through irresponsible citation, attribution, or paraphrasing; ethical misconduct does not include honest error or differences of opinion.

publicly sanctioned

A formal disciplinary action of public record, excluding actions due to insufficient continuing education, checks returned for insufficient funds, or late payment of fees not resulting in unlicensed practice.

reasonable or reasonably

Supported or justified by fact or circumstance and being in accordance with reason, fairness, duty, or prudence.

self-report

A professional obligation of self-disclosure that requires (a) notifying ASHA Standards and Ethics and (b) mailing a hard copy of a certified document to ASHA Standards and Ethics (see term above). All self-reports are subject to a separate ASHA Certification review process, which, depending on the seriousness of the self-reported information, takes additional processing time.

shall vs. may

Shall denotes no discretion; may denotes an allowance for discretion.

support personnel

Those providing support to audiologists, speech-language pathologists, or speech, language, and hearing scientists (e.g., technician, paraprofessional, aide, or assistant in audiology, speech-language pathology, or communication sciences and disorders). For more information, read the Issues in Ethics Statements on Audiology Assistants and/or Speech-Language Pathology Assistants.

telepractice, teletherapy

Application of telecommunications technology to the delivery of audiology and speech-language pathology professional services at a distance by linking clinician to client/patient or clinician to clinician for assessment, intervention, and/or consultation. The quality of the service should be equivalent to in-person service. For more information, see the telepractice section on the ASHA Practice Portal.

written

Encompasses both electronic and hard-copy writings or communications.

Principle of Ethics I

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

Rules of Ethics

A. Individuals shall provide all clinical services and scientific activities competently.
B. Individuals shall use every resource, including referral and/or interprofessional collaboration when appropriate, to ensure that quality service is provided.
C. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.
D. Individuals shall not misrepresent the credentials of aides, assistants, technicians, support personnel, students, research interns, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name, role, and professional credentials of persons providing services.
E. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to the provision of clinical services to aides, assistants, technicians, support personnel, or any other persons only if those persons are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.
F. Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, judgment, or credentials that are within the scope of their profession to aides, assistants, technicians, support personnel, or any nonprofessionals over whom they have supervisory responsibility.
G. Individuals who hold the Certificate of Clinical Competence may delegate to students tasks related to the provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession only if those students are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.
H. Individuals shall obtain informed consent from the persons they serve about the nature and possible risks and effects of services provided, technology employed, and products dispensed. This obligation also includes informing persons served about possible effects of not engaging in treatment or not following clinical recommendations. If diminished decision-making ability of persons served is suspected, individuals should seek appropriate authorization for services, such as authorization from a spouse, other family member, or legally authorized/appointed representative.
I. Individuals shall enroll and include persons as participants in research or teaching demonstrations only if participation is voluntary, without coercion, and with informed consent.
J. Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established guidelines for clinical practice and the responsible conduct of research.

K. Individuals who hold the Certificate of Clinical Competence shall evaluate the effectiveness of services provided, technology employed, and products dispensed, and they shall provide services or dispense products only when benefit can reasonably be expected.
L. Individuals may make a reasonable statement of prognosis, but they shall not guarantee—directly or by implication—the results of any treatment or procedure.
M. Individuals who hold the Certificate of Clinical Competence shall use independent and evidence-based clinical judgment, keeping paramount the best interests of those being served.
N. Individuals who hold the Certificate of Clinical Competence shall not provide clinical services solely by correspondence but may provide services via telepractice consistent with professional standards and state and federal regulations.
O. Individuals shall protect the confidentiality and security of records of professional services provided, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.
P. Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities and may disclose confidential information only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.
Q. Individuals shall maintain timely records and accurately record and bill for services provided and products dispensed and shall not misrepresent services provided, products dispensed, or research and scholarly activities conducted.
R. Individuals whose professional practice is adversely affected by substance abuse, addiction, or other health-related conditions are impaired practitioners and shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.
S. Individuals who have knowledge that a colleague is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority, internally if a mechanism exists and, otherwise, externally.
T. Individuals shall provide reasonable notice and information about alternatives for obtaining care in the event that they can no longer provide professional services.

Principle of Ethics II

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

Rules of Ethics

A. Individuals who hold the Certificate of Clinical Competence shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their certification status, education, training, and experience.
B. Members who do not hold the Certificate of Clinical Competence may not engage in the provision of clinical services; however, individuals who are in the certification application process may engage in the provision of clinical services consistent with current local and state laws and regulations and with ASHA certification requirements.
C. Individuals who engage in research shall comply with all institutional, state, and federal regulations that address any aspects of research, including those that involve human participants and animals.
D. Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.
E. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct research activities that exceed the staff member's certification status, competence, education, training, and experience.
F. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise the staff member's independent and objective professional judgment.
G. Individuals shall make use of technology and instrumentation consistent with accepted professional guidelines in their areas of practice. When such technology is not available, an appropriate referral may be made.

H. Individuals shall ensure that all technology and instrumentation used to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated.

Principle of Ethics III

Individuals shall honor their responsibility to the public when advocating for the unmet communication and swallowing needs of the public and shall provide accurate information involving any aspect of the professions.

Rules of Ethics

A. Individuals shall not misrepresent their credentials, competence, education, training, experience, and scholarly contributions.
B. Individuals shall avoid engaging in conflicts of interest whereby personal, financial, or other considerations have the potential to influence or compromise professional judgment and objectivity.
C. Individuals shall not misrepresent research and scholarly activities, diagnostic information, services provided, results of services provided, products dispensed, or the effects of products dispensed.
D. Individuals shall not defraud through intent, ignorance, or negligence or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants and contracts for services provided, research conducted, or products dispensed.
E. Individuals' statements to the public shall provide accurate and complete information about the nature and management of communication disorders, about the professions, about professional services, about products for sale, and about research and scholarly activities.
F. Individuals' statements to the public shall adhere to prevailing professional norms and shall not contain misrepresentations when advertising, announcing, and promoting their professional services and products and when reporting research results.
G. Individuals shall not knowingly make false financial or nonfinancial statements and shall complete all materials honestly and without omission.

Principle of Ethics IV

Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

Rules of Ethics

A. Individuals shall work collaboratively, when appropriate, with members of one's own profession and/or members of other professions to deliver the highest quality of care.
B. Individuals shall exercise independent professional judgment in recommending and providing professional services when an administrative mandate, referral source, or prescription prevents keeping the welfare of persons served paramount.
C. Individuals' statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.
D. Individuals shall not engage in any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.
E. Individuals shall not engage in dishonesty, negligence, fraud, deceit, or misrepresentation.
F. Applicants for certification or membership, and individuals making disclosures, shall not knowingly make false statements and shall complete all application and disclosure materials honestly and without omission.
G. Individuals shall not engage in any form of harassment, power abuse, or sexual harassment.
H. Individuals shall not engage in sexual activities with individuals (other than a spouse or other individual with whom a prior consensual relationship exists) over whom they exercise professional authority or power, including persons receiving services, assistants, students, or research participants.

I. Individuals shall not knowingly allow anyone under their supervision to engage in any practice that violates the Code of Ethics.
J. Individuals shall assign credit only to those who have contributed to a publication, presentation, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.
K. Individuals shall reference the source when using other persons' ideas, research, presentations, results, or products in written, oral, or any other media presentation or summary. To do otherwise constitutes plagiarism.
L. Individuals shall not discriminate in their relationships with colleagues, assistants, students, support personnel, and members of other professions and disciplines on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, dialect, or socioeconomic status.
M. Individuals with evidence that the Code of Ethics may have been violated have the responsibility to work collaboratively to resolve the situation where possible or to inform the Board of Ethics through its established procedures.
N. Individuals shall report members of other professions who they know have violated standards of care to the appropriate professional licensing authority or board, other professional regulatory body, or professional association when such violation compromises the welfare of persons served and/or research participants.
O. Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation; the Code of Ethics shall not be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.
P. Individuals making and responding to complaints shall comply fully with the policies of the Board of Ethics in its consideration, adjudication, and resolution of complaints of alleged violations of the Code of Ethics.
Q. Individuals involved in ethics complaints shall not knowingly make false statements of fact or withhold relevant facts necessary to fairly adjudicate the complaints.
R. Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice, research ethics, and the responsible conduct of research.
S. Individuals who have been convicted; been found guilty; or entered a plea of guilty or nolo contendere to (1) any misdemeanor involving dishonesty, physical harm—or the threat of physical harm—to the person or property of another, or (2) any felony, shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the conviction, plea, or finding of guilt. Individuals shall also provide a certified copy of the conviction, plea, nolo contendere record, or docket entry to ASHA Standards and Ethics within 30 days of self-reporting.
T. Individuals who have been publicly sanctioned or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the final action or disposition. Individuals shall also provide a certified copy of the final action, sanction, or disposition to ASHA Standards and Ethics within 30 days of self-reporting.

Index terms: ethics

Reference: American Speech-Language-Hearing Association. (2016). Code of ethics [Ethics]. Available from www.asha.org/policy/.

© Copyright 2015 American Speech-Language-Hearing Association. All rights reserved.

doi:10.1044/policy.ET2016-00342

POLICY OF NONDISCRIMINATION

The Department of Communication Sciences and Disorders and the Communication Disorders Clinic strictly adhere to the university's policy of nondiscrimination.

Policy of Non-Discrimination

Florida Atlantic University is committed to a policy of nondiscrimination. It is against the policy of the University to discriminate against, or exclude from participation in benefits or activities, either on the staff or in the student body, any person on the grounds of race, color, religion, sex, age, national origin, marital status, veteran status, sexual orientation or mental or physical disablement, provided such disablement, with reasonable accommodation, does not prevent satisfactory work performance. This nondiscrimination policy also relates to the University's actions concerning choice of contractors and suppliers of goods and services and to the use of University facilities.
(Complete policy is in Appendix A)

MISSION STATEMENTS

Florida Atlantic University

Vision Statement

Florida Atlantic University aspires to be recognized as a university of first choice for excellent and accessible undergraduate and graduate education, distinguished for the quality of its programs across multiple campuses, emulated for its collaborations with regional partners, and internationally acclaimed for its contributions to creativity and research.

Mission Statement

Florida Atlantic University is a public research university with multiple campuses along the southeast Florida coast serving a uniquely diverse community. It promotes academic and personal development, discovery, and lifelong learning. FAU fulfills its mission through excellence and innovation in teaching, outstanding research and creative activities, public engagement, and distinctive scientific and cultural alliances, all within an environment that fosters inclusiveness.

FAU Values

Florida Atlantic University values an academic environment that facilitates intellectual growth through open and honest expression. The University is committed to excellence at all levels of the educational and creative experience, to success for all students, and to development of the capacity to make reasoned and discriminating judgments with respect for differences and diversity in ideas. The University is dedicated to lifelong learning, which encourages the continual use of the mind. The University plays a vital role in the life of the surrounding community, in society, and as an engine for economic development. More specifically, the University commits to:

- Prepare students to fulfill a productive destiny in the workplace and in society;
- Value and disseminate scholarship, research, creative activity and use that scholarship to inform the academic discipline, teaching, and community engagement;
- Promote academic freedom and an atmosphere of free and open inquiry;
- Recognize and reward superior performance, creativity, innovation, and entrepreneurship in all facets of University activity;
- Support all those who rely on the University, such as parents, employers of students and graduates, and community partners;
- Account for the sound use and careful stewardship of the resources provided to the University;
- Provide equal access, equal rights, and equal justice, and encourage mutual regard for the rights and liberties of all persons;
- Respect all persons and display civility in all interactions;
- Provide a secure environment for the pursuit of learning;
- Foster community engagement, service, and social responsibility;
- Promote honesty in all spheres, social and moral development, and ethical standards in all areas of human activity;
- Ensure clear and open communication and sharing of information.

College of Education

The mission of the College of Education is to serve the community of Florida Atlantic University by providing effective leadership in areas of research, service, and teaching at the local, state, national, and international levels, through the initial and advanced preparation of informed, capable, ethical and reflective decision-making professionals. Our faculty and students seek to promote and sustain authentic change, excellence, and equity in their respective fields, and in the organizations and systems with which they are associated. The College's programs reflect changing societal needs and incorporate web-supported delivery systems, current methodologies, and research, which bring faculty and students together to improve the quality of education for all in an increasingly diverse, technological, inclusive, and global society.

Department of Communication Sciences and Disorders

The Mission of the Department of Communication Sciences and Disorders is fourfold:

- to prepare highly qualified, capable, ethical professionals who will engage in reflective decision-making and promote and sustain authentic change, excellence, and equity, as well as exceeding the Department's and ASHA's guidelines for clinical and academic preparation in speech-language pathology;
- to engage in research of the normal and abnormal processes of speech, hearing, and language towards the furthering of both clinical and academic knowledge reflecting the diversity and needs of a global society while considering current methodologies and incorporating current technology;
- to provide quality speech, language, and hearing diagnostic and habilitation/ rehabilitation services to all FAU students, staff, and faculty and to any individual outside of the FAU community requiring such services;
- to act as a resource for the University, as well as for local, state, national, and international communities, by serving as consultants, liaisons, lecturers, facilitators, master clinicians, and authorities in the various areas of communication disorders.

STUDENTS WITH DISABILITIES

In compliance with the Americans with Disabilities Act (ADA) and FAU policy, students with disabilities who require special accommodations to properly execute course work must register with Student Accessibility Services (SAS) and provide the instructor of this course with a letter from SAS which indicates the reasonable accommodations that would be appropriate for this course. SAS information is available at http://www.fau.edu/sas/.

Students' Rights
A college student with a disability has the right to appropriate accommodations under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act Amendment Act 2008. OSD counselors, along with input from the student, make decisions regarding the nature of the academic accommodations. If a student feels as though he or she has been wrongly denied an accommodation or otherwise discriminated against, based on their disability, they may file a complaint with SAS.

Students' Responsibilities
Individuals must be accepted FAU students to receive services through SAS. Self-identification and registration with SAS are the student's option and is not mandatory; however, in order to ensure receiving authorized academic accommodations due to a disability from FAU, the student must register with SAS.

In order to complete SAS registration process, it is the responsibility of the student with a disability to self-report functional limitations of the disability as well as effective prior accommodations and to provide SAS with appropriate written documentation from a licensed professional in the field concerning the specific diagnosis and expected academic limitations and attend an intake interview with an SAS counselor. If SAS determines that the self-report or presented documentation is outdated, incomplete, or vague, it is the responsibility of the student to

provide additional documentation that appropriately demonstrates the current existence of a disability.

It is the student's responsibility to submit the "SAS Semester Request for Services" form, "Testing Accommodations Form," "Notetaker Request Form", and any other appropriate forms to SAS in a timely manner each semester in order to be guaranteed the appropriate accommodations. It is the student's responsibility to utilize authorized accommodations responsibly and keep in close contact with SAS personnel. The student is not required to utilize an accommodation authorized by SAS; however, the student is responsible for keeping SAS personnel advised of any major changes involving an accommodation.

POLICY ON GRADUATE STUDENTS WHO SPEAK ENGLISH WITH ACCENTS AND DIALECTS

In compliance with ASHA Code of Ethics and Florida Atlantic University's Policy of Non-Discrimination, the FAU Department of Communication Sciences and Disorders does not discriminate against students who speak English with an accent or dialect. All students should possess the expected level of diagnostic and clinical case management skills and it is expected that students will be able to provide modeling of target phonemes, grammatical features, and any other aspect of speech and language that is essential in the treatment of a client. As with any proficiencies deemed necessary for the profession of speech-language pathology, needed improvement will be addressed in a manner judged as appropriate by faculty.

American Speech-Language-Hearing Association. (1998). *Students and professionals who speak English with accents and nonstandard dialects: issues and recommendations* [Position Statement]. Available from www.asha.org/policy.

I. ACADEMIC POLICIES AND PROCEDURES

I-A. Prerequisite Course Work

A.1 **All** prerequisite coursework must be completed **prior** to beginning the graduate curriculum.

Comparable prerequisite classes taken at an accredited institution of higher learning will be accepted.

A.2 **General Education Requirements - 15 credits must be completed as listed below:**
(Some or all of these classes may have been completed as part of the baccalaureate degree.)
College-level Statistics 3 credits
(A stand-alone course in statistics is required. Research methodology courses may not be used to satisfy the statistics requirement)
Biological Science 3 credits
(Acceptable courses in biological sciences should emphasize a content area related to human or animal sciences e.g., biology, human anatomy and physiology, neuroanatomy and neurophysiology, human genetics, veterinary science)
Physical Science 3 credits
(Acceptable courses in physical sciences should include physics or chemistry)
Psychological/Social Sciences 6 credits
(Acceptable courses in social/behavioral sciences should include psychology, sociology, anthropology, or public health)

A.3 **Basic Human Communication Processes (15 credits)**
SPA 4011 – Speech and Hearing Science
SPA 4101 – Anatomy and Physiology of Speech and Hearing Mechanism
SPA 5107 – Neural Bases Speech, Language, and Hearing
LIN 4710 – Normal Processes of Speech and Language Development
SPA 4112 – Phonetics

A.4 Students who believe they have taken comparable/equivalent course work to SPA 5107 – Neural Bases Speech, Language, and Hearing, must be able to show transcript evidence of a course that included the content of SPA 5107. If the course was not a basic human communication processes course exclusively, at least half of the course must have been devoted to normal processes.

Students must petition the department and meet the following conditions:
(instructions for submitting a petition may be found on page 20 – *Requesting exceptions to policies and procedures*)

- 15 credits in basic human communication processes (not including the course being substituted for SPA 5107).

Basic human communication and swallowing processes encompass normal human communication and swallowing processes including their biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases.

and

- Test out of SPA 5107 with a minimum passing score of "60". (contact the instructor)

Students who fail to earn a minimum passing score of "60" will be required to take SPA 5107 when it is next offered or secure the approval of the instructor and provide proof of registration for an online course to be taken in the upcoming semester.

A.5 Additional Required Prerequisites (6 credits)
SPA 4002 – Introduction to Communication Disorders
SPA 5033 – Intro to Audiological Sciences

I-B. Transfer of Graduate Credit

B.1 University Policy (Master's programs) – Transfer of Graduate Credit

Master's programs may accept a **maximum of 6 graduate credits** earned from another institution beyond a baccalaureate degree.

A **maximum of 6 graduate credits** earned from another institution in a non-degree-seeking status may be transferred.

Acceptance of transfer credits for a course is dependent upon the following provisions:

- The student received a grade of 3.0 or better on a 4.0 scale in the course to be transferred.
- The course was taken at a regionally or nationally accredited institution.
- The course is relevant to the graduate program in which the student is accepted, as judged by the admissions committee of the department or program.
- The course is listed on the official transcript received by the Office of Graduate Admissions.
- The course was completed within the six years preceding admission to the program.

Since many graduate programs do not accept transfer credits that have been applied to a completed degree, the student should consult the department offering the degree.

B.2 Communication Sciences and Disorders Policy- Transfer of Graduate Credit

The department's policy on the transfer and acceptance of graduate credits is as follows:

- In accordance with the university's policy and pending faculty review, the department may elect to accept a maximum of 6 graduate credits earned from another institution or earned as a non-degree-seeking student.
- Students seeking transfer credit must provide the official course description from the university's catalog, as well as the course syllabus, to the faculty member responsible for reviewing the course content and requirements.
- Students may be asked to "test out" of a class to ensure that course content has been understood and assimilated. Students must earn a passing grade of at least a B (83% or above). If a student does not pass the qualifying test with a minimum grade of "B", he/she will have to take the department's course and the transfer of credit will not be accepted.

I-C. Graduate Course Work

C.1 Graduate course enrollment is restricted to degree-seeking students only (i.e., those who have been accepted to the program officially).

C.2 Students may not enroll for graduate courses without a planned program and an advisor's signature on the enrollment form.

C.3 Students must earn a minimum grade of B in all graduate coursework taken in the department. Students must repeat any course in which they fail to earn a B (i.e., B- or below). A course may be repeated only once. Students who fail two classes, by earning a grade of B- or below, will be dismissed from the program.

C.4 The faculty will form a committee for struggling students with their advisor and an additional faculty member.

C.4 Required Graduate Courses

College of Education Requirements:	
EDF 6481 – Educational Research Methods	3 cr.
STA 6113 – Statistical Methods in Education	3 cr.
Communication Disorders Graduate Program Requirements:	
SPA 6553 – Diagnostic Principles and Procedures in Communication Disorders	3 cr.
SPA 6401 – Language Disorders: Birth – 4	3 cr.
SPA 6403 – Language Disorders: School Age & Adolescent	3 cr.
SPA 6204 – Disorders of Articulation and Phonology	3 cr.
SPA 6211 – Voice and Velopharyngeal	3 cr.
Disorders SPA 6225 – Disorders of Fluency	3 cr.
SPA 6322 – Aural Habilitation/Rehabilitation	3 cr.
SPA 6410 – Adult Language Disorders	3 cr.
SPA 6230 – Motor Speech Disorders and Augmentative Communication	3 cr.
SPA 6558 – Evaluation and Treatment of Linguistically and Culturally Different Populations	3 cr.
SPA 6006 – Professional Practice and Program Organization in Speech-Language Pathology	3 cr.
SPA 6565 – Dysphagia	3 cr.
SPA 6559 – Augmentative and Alternative Communication	3 cr.
SPA 6505 – Clinical Practicum	14 cr.
Non-Thesis option - Elective courses. 2 courses (6 credits) from:	
SPA 6513 – Counseling/Supervision in SLP	6 cr.
SPA 6438 – Genetics of Communication Disorders	
SPA 6572 – IPP in Healthcare and Education for SLP	
(or others approved by the department)	
or	
Thesis option	6 cr.
Total Graduate Program:	**65 cr**

C.5 Master's Degree Comprehensive Examination

Students who elect the non-thesis option must complete 2 approved elective courses and comprehensive exams in the spring semester before their summer or fall graduation.

General Information:

- Accredited programs are required by the CAA to provide a "capstone" activity as a component of the degree program.
- A written comprehensive will be given at the start of the summer term. All students planning to graduate in the summer or fall are expected to take the comprehensive examination.
- All students (whether in- or out-of-state) are required to take the comprehensive exams on campus.
- The comprehensive examination will consist of 6 essay questions that cover the 9 content areas identified by the CAA. Those 9 areas (K-9) are:
    - articulation
    - fluency
    - voice and resonance, including respiration and phonation
    - receptive and expressive language (phonology, morphology, syntax, semantics, and pragmatics) in speaking, listening, reading, writing, and manual modalities
    - hearing, including the impact on speech and language
    - swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myofunction)
    - cognitive aspects of communication (e.g., attention, memory, sequencing, problem-solving, executive functioning)
    - social aspects of communication (e.g., behavioral and social skills affecting communication)
    - communication modalities (e.g., oral, manual, augmentative and alternative communication techniques and assistive technologies
- Written comprehensive exams will be administered in two, half-day writing periods. Students will answer 3 questions during each writing period. Each question will be allotted 1 hour, with a 10 minute break between each question.
- Student answers to the comprehensive questions will be graded as either:
    - High Pass: A comprehensive and a thorough response to all aspects of the question, all facts are completely accurate and highly detailed, and if needed, frequent citing of the appropriate literature. Overall, this answer demonstrates in-depth synthesis and critical analysis of the topic areas.
    - Pass: A comprehensive response to the question, all facts are accurate, may be missing minor detail, and if needed, some citing of appropriate literature. Overall, this answer demonstrates acceptable synthesis and critical analysis of the topic areas.
    - Low Pass: Not as strong of an answer as should be expected from a graduate student, significant amount of content may be correct, but other minor portions are vague or incomplete. For questions that require citations, these are insufficient. Some amount of synthesis and critical analysis, but not of the quality expected from a graduate student.
    - Fail: Factual inaccuracies, unsatisfactory answer which does not completely address the question (for a graduate level). For questions that require citations, no or inaccurate citations. This answer may be a laundry list of points, showing little or no evidence of critical thinking to answer the question.

- In general, students who earned a qualifier of High Pass or Pass have completed the Comprehensive Exam for that particular topic area. Low pass was assigned to students who required remediation, either through discussion with the professor or any type of rewrite. For a Fail, the student did not pass following the required two rewrites and oral comprehensive meeting.
- Exam questions will be read and evaluated by the faculty member responsible for the corresponding content area(s). Students will be notified of their performance, in

writing, in June.

- Students who do not receive a "satisfactory" evaluation on one or more comprehensive questions will be asked to remediate. The form of the remediation will be determined by the faculty member responsible for the content area(s).
- Students who do not receive a "satisfactory" evaluation on the second writing attempt will be required to take an oral comprehensive exam, in the deficient area(s), before a panel of 3 faculty.
- Students who do not receive a "satisfactory" evaluation on the oral comprehensive examination will be required to complete additional course work (e.g. course, independent study) in area(s) of deficiency and satisfactorily answer questions in the deficit area(s). Graduation will be delayed until at least the fall term.
- Students are not eligible for graduation until an official, passing score on the Praxis has been reported to the department AND the student has passed the comprehensive examination.

C.6 Thesis/Non-Thesis Guide

C.6.a: Acceptance into the Graduate Program

See CSD Graduate Advisor -> Sign Graduate Student Programming Contract
Select Thesis or Non-Thesis Option

Thesis:

First semester: identify a potential advisor and complete coursework with a 3.5 GPA.

Second semester: provide a writing sample for acceptance. Once accepted identify thesis committee.

Third semester (1 thesis credit):
Prepare formal thesis proposal and obtain committee approval for thesis topic.
Submit application for candidacy to Graduate Studies Office in accordance with College and University guidelines.

Fourth and Fifth semester (2 credits each semester):
Conduct thesis research and prepare thesis paper.

Sixth Semester (1 credit):
Defend Thesis.
Provide final copies to advisor, department, and graduate school, according to College and University deadlines.

Non-Thesis:

Requirements:
Take Two Electives.
Comprehensive Exams.
Oral Exit Interview (if necessary)

I-D. Graduate Course Rotations

D.1 Full Time Graduate Course Rotation

(All prerequisite course work must be completed prior to beginning the graduate course sequence)

	Fall Semester	Spring Semester	Summer Semester
Year 1	SPA 6553-Dx Prin/Proc in CD SPA 6204-Artic/Phon SPA 6401-Lang Dis: Birth – 4 SPA 6410-Adult Lang	SPA 6230-Motor Speech SPA 6225-Fluency Dis SPA 6403-Lang Dis: Sch Age/Adol SPA 6505 Clinic (2 cr)	SPA 6322-Aural Rehab SPA 6211-Voice & Velo SPA 6505 Clinic (2 cr)
Year 2	STA 6113-Statistics SPA 6565-Dysphagia SPA 6558-E&T Ling/Cult Diff Pop SPA 6505-Clinic (2 cr)	EDF 6481 – Ed Research SPA 6559 – Aug and Alt Comm Elective + non-thesis option **or** Thesis option SPA 6505 – Off-campus (4 cr)	SPA 6006-Prof Prac & Prog Org Elective + non-thesis option **or** Thesis option SPA 6505 – Off-campus (4 cr)

D.2 Part-time Graduate Course Rotations

(All prerequisite course work must be completed prior to beginning the graduate course sequence)

Rotation 1: (2 courses per semester)

	FALL SEMESTER	SPRING SEMESTER	SUMMER SEMESTER
YEAR 1	SPA 6553-Dx Prin/Proc in CD **and 1 from among:** SPA 6204-Artic/Phon SPA 6410-Adult Lang SPA 6401-Lang Dis: Birth – 4	SPA 6403-Lang Dis: Sch Age/Adol SPA 6225-Fluency Dis	SPA 6322-Aural Rehab
YEAR 2	**Two not taken Fall – Year 1**	SPA 6230-Motor Speech SPA 6559 – Aug and Alt Comm	SPA 6211-Voice & Velo **and either** STA 6113-Statistics EDF 6481 – Ed Research
YEAR 3	SPA 6565-Dysphagia SPA 6558-E&T Ling/Cult Diff Pop	SPA 6505 – Clinic 1 (2 cr) **and** Elective	SPA 6505 – Clinic 2 (2 cr) **and** Elective (if not taken in Spring) or STA 6113-Statistics EDF 6481 – Ed Research
YEAR 4	SPA 6505 – Clinic 3 (2 cr) **and if not yet taken** Elective or STA 6113-Statistics EDF 6481 – Ed Research	SPA 6505 – Off-campus (4 cr) **and** Non-thesis option **or** Thesis option	SPA 6505 – Off-campus (4 cr) SPA 6006-Prof Prac **and** Non-thesis option **or** Thesis option

Rotation 2: (3 courses per semester)

	FALL SEMESTER	SPRING SEMESTER	SUMMER SEMESTER
YEAR 1	SPA 6553-Dx Prin/Proc in CD **and 2 from among:** SPA 6204-Artic/Phon SPA 6410-Adult Lang SPA 6401-Lang Dis: Birth – 4	SPA 6225-Fluency Dis SPA 6230-Motor Speech SPA 6403-Lang Dis: Sch Age/Adol	SPA 6322-Aural Rehab SPA 6211-Voice & Velo
YEAR 2	**1 not taken Fall - Year 1** **and** SPA 6565-Dysphagia SPA 6558-E&T Ling/Cult Diff Pop	SPA 6505 – Clinic 1 (2 cr) STA 6113-Statistics SPA 6559 – Aug and Alt Comm	SPA 6505 – Clinic 2 (2 cr) EDF 6481 – Ed Research Elective
YEAR 3	SPA 6505 – Clinic 3 (2 cr) **and if not taken** Elective	SPA 6505 – Off-campus (4 cr) Non-thesis option **or** Thesis option	SPA 6505 – Off-campus (4 cr) SPA 6006-Prof Prac Non-thesis option **or** Thesis option

I-E. Electives Petition Process

E.1 Students may petition to take a course not offered by the Department of Communication Sciences and Disorders as their elective.

E.2 The petition should include (but is not limited to) the following:

- The Department offering the course, the course number, credits, and course description. Include whether the course is distance learning, has a condensed/unusual format, is a fast-track course, etc.
- A rationale: Explain why you want to take the course.
- What does the course offer you professionally that you have not had an opportunity to study?
- How will it augment/amplify your knowledge in and practice of speech-language pathology?
- Is there overlap/duplication of information with courses offered by the CSD program (prerequisite and graduate)? If so, what? Why should this overlap/duplication be allowed?
- How does this course relate to the study of communication sciences and disorders?

E.3 The petition should be submitted to the Chair of the Department's Petition Committee, who will request that the petition be placed on the agenda for the next scheduled department faculty meeting. The student will be notified in writing of the decision of the Petition Committee.

I-F Attendance Policy

F.1 A student may elect to follow either the full-time or part-time course rotations (synonymous with full-time or part-time attendance).

F.2 Students who elect the full-time course rotation and decide subsequently to follow a part-time course rotation must notify their advisors and the Clinic Director as soon as this decision is made. This notification must occur at least one month before the end of the semester prior to the semester in which the change in status is to begin. e.g. November 1 for a change in status for the spring semester;

March 1 for a change in status for the summer semester; June 1 for a change in status for the fall semester). Additionally, students changing to a part-time course rotation must meet with their advisors to revise their planned programs and must continue to follow the mandated course sequence. Students will not be allowed to take courses or clinical practicum out of sequence. Students should recognize that switching to part-time attendance will delay the original projected graduation date listed on the initial planned program. Students are required to complete the graduate program within ten years.

F.3 The department expects students to attend all of their scheduled classes and keep all of their scheduled client appointments (time commitments) in both on- and off-campus practica in order to satisfy academic and clinical objectives as outlined by the faculty/supervisors. The effect of absences upon grades is determined by the instructor. The department reserves the right to discipline or dismiss, at any time, individuals who exhibit ongoing unexcused absences or chronic tardiness.

F.4 Students are responsible for arranging to make up work missed because of legitimate class absences e.g. illness, family emergencies, military obligation, court-imposed legal obligations. It is the student's responsibility to notify the instructor prior to any anticipated absence and within a reasonable amount of time after an unanticipated absence (ordinarily before the next scheduled class meeting). Students should review their course syllabi for specific policies regarding absences and whether there will be opportunities for make-up activities.

F.5 Students should avoid scheduling vacations, recreational trips, and family outings during the academic and clinic terms. Notifying a faculty member or clinic supervisor that "I will be away" is neither acceptable nor sufficient. Students must make arrangements for any absences during regularly scheduled classes and clinic, well in advance of an impending absence. Students must be prepared to meet the requirements identified by faculty members and/or clinical supervisors to accommodate an irregular absence.

I-G. Grading System

The Department of Communication Sciences and Disorders uses the following grading system:

A = 93-100	C = 73-76
B+ = 87-89	D+ = 67-69
B = 83-86	D = 63-66
B- = 80-82	D- = 60-62
C+ = 77-79	F = 59 and below

Faculty members, at their discretion, may vary this system to accommodate special assignments or needs for a particular course. Grading policy for each course is stated in the course's syllabus. When the grading policy for a course differs from the department's system, and is included in the course syllabus, the grading system for that course replaces and takes precedence over the department's system.

I-H Critical Assignment Policy

If a student fails to achieve either "Exemplary" or "Satisfactory" ratings on all critical assignments assigned to a course, or remediate within a course's schedule, it is the policy of the Department of Communication Sciences and Disorders that the student will earn a grade of "F" for that course and the course must be repeated.

I-I Livetext:

CSD students are required by the College of Education to have active LiveText accounts (standard version) to track mastery of required skills, competencies, and critical assignments, and to meet program and college accreditation requirements. A student's critical assignment grades will not be recorded until the department has verification of an account. Thus, lacking a LiveText account could affect grades, eligibility for clinic, and access to academic records.

I-J Welcoming Environment:

The Department of Communication Sciences and Disorders actively welcomes all students into the program and works diligently to ensure that none are unfairly excluded from academic or departmental activities. This is facilitated in three ways:

1. During new student orientation, the importance of making sure all students feel welcome and included is covered in detail,
2. Anonymous and secure website reporting of everything from micro-aggressions to clear prejudice (and including acts of exclusion) is available to all students, and
3. A council of students is formed to address reports of unwelcome behavior.

The council will consist of department NSSLHA officers, graduate assistants, and other interested students. Faculty will monitor the website and provide a summary of comments to the council, assuring that they are as anonymous as possible*. The officers and advisor will address complaints as they see fit, including potentially involving faculty and/or staff. The faculty NSSLHA advisor will oversee the process.

*If the comments are about a faculty member, the student(s) will be informed how to file a complaint to The Office of Civil Rights and Title IX.

I-K Support Plans for Struggling Students:

Students whom the faculty deem to be struggling in the program will be provided with a Support Plan. The procedure is as follows.

1. The student is identified as needing support in areas related to academic performance (i.e., low grades), clinical performance (missed deadlines, unable to meet objectives, etc.), or essential functions (e.g., professionalism). The vote of the faculty is the essential determination of whether a Support Plan will be implemented. Implementation will be likely if there is a major area of concern about a student, or two or more minor concern areas. The following bases will be taken into account when determining the need for a Support Plan:
    - Current grade averages in coursework, particularly if the student is averaging less than a B in two or more courses
    - Reported concerns about a student by faculty, staff, and/or peers
    - One or more inadequate clinical skills that are not improving with regular supervision

2. Once the need for a Support Plan is determined, the student will meet with his or her Support Plan Committee. This committee will consist of the student's advisor, the concerned faculty member(s), and, if the concern is clinical, a member of the clinical faculty. In the instance in which the concerned faculty member is also the advisor, the department chair will appoint an additional faculty member to the committee. Together, the student and committee will create a plan, using the department's *Support Plan For KASA Learning Indicators*. This plan will list skills that require remediation (if applicable), measurable goals with criteria for achievement, timelines for achieving said goals and/or meeting with the committee (including deadlines), and implementation results. The student and committee members will sign the plan, signifying their approval to initiate it, and all will receive a copy. All goals and documentation must be dated, including those related to subsequent meetings.

3. Once all goals are achieved to the satisfaction of the committee members, they will sign and date their approval and the original completed plan will be filed in the student's academic

folder. All committee members and the student will receive copies of the completed form. The student will continue on through the sequence of training. If new concerns arise regarding the student, a new plan will be implemented based on these steps.

The committee will determine additional steps for students who are unable to meet Support Plan goals. Because the goals will be based on academic/clinical performance and essential functions of students desiring to be communication professionals, these additional steps are likely to be strict.

The committee will determine whether progress toward unmet goals that are outside academic or clinical courses (e.g., unprofessional or otherwise questionable behavior within the department) is sufficient to warrant the student's continuation in the program. If not, the committee will refer the matter to the full faculty for a vote.

- Reported concerns about a student by faculty, staff, and/or peers
- In cases where a student is making progress toward, but does not meet, course-related (academic or clinical) goals by the listed deadlines, the committee may recommend that a grade of Incomplete be given. For clinic skills, this action would occur only if the committee, in conjunction with the clinic director, determines that the unmet goals can reasonably be carried over to the following semester without negatively impacting clients.
- In many cases, however, a student who cannot meet academic Support Plan goals will earn one or more unsatisfactory grades. If such a grade occurs in two or more courses, the student will be dismissed from the program.
- If the unsatisfactory clinical skill or skills are those deemed necessary to pass clinical practicum, the student will not earn a passing grade and will lose all client contact hours for the semester.

Students have the right to petition actions taken by the Support Plan Committee.

I-L Plagiarism and Cheating Policy:

The department has a zero-tolerance policy for students found plagiarizing and/or cheating.

Students who are found to have cheated or to have plagiarized will, after following the University procedures described below, receive an immediate "F" in the course and may be dismissed from the graduate program following a faculty review.

> **Plagiarism**, as defined by Webster's Unabridged Dictionary, is:
> *"The unauthorized use or close imitation of the language and thoughts of another author and the representation of them as one's own original work."*

Plagiarism encompasses both the presentation of a prominent or published author's work as your own and the presentation of another student's work as your own. This also includes presenting another's thoughts or opinions as your own in oral presentation.

Because plagiarism is taken very seriously, CSD faculty may use "Turnitin", or similar plagiarism detection tool. The system prevents and detects plagiarism by comparing papers to billions of pages on the Internet as well as to an internal database of submitted papers. Students agree that by taking courses, all required papers may be subject to submission for textual similarity review to Turnitin.com for the detection of plagiarism. All submitted papers will be included as source documents in the Turnitin.com reference database solely for the purpose of detecting plagiarism of such papers.

> **Cheating**, with regard to exams, as defined by Webster's Unabridged Dictionary, is: *"The taking of an examination or test in a dishonest way, as by improper access to answers."*

Examples would include, but are not limited to, copying answers from another student's paper or bringing written answers into an exam without authorization.

The department adheres to the Florida Administrative Code and follows the University procedures (explained below) with regard to instances of plagiarism and cheating.

University Policy: Honor Code, Academic Irregularities, and Students' Academic Grievances

Florida Administrative Code:
Florida laws and Florida Atlantic University administrative rules are subject to change at any time. For laws and rules in effect at any given time, the appropriate statute or rule must be consulted at: *http://fac.dos.state.fl.us/faconline/chapter06.pdf*.

6C5-4.001 Honor Code, Academic Irregularities, and Students' Academic Grievances.

(1) Academic irregularities frustrate the efforts of the faculty and serious students to meet university goals. Since faculty, students, and staff have a stake in these goals, the responsibility of all is to discourage academic irregularities by preventative measures and by ensuring that appropriate action is taken when irregularities are discovered. Thus, FAU has an honor code requiring a faculty member, student, or staff member to notify an instructor when there is reason to believe an academic irregularity is occurring in a course. The instructor's duty is to pursue any reasonable allegation, taking action, as described below, where appropriate.

(2) The following shall constitute academic irregularities.
- (a) The use of notes, books, or assistance from or to other students while taking an examination or working on other assignments unless specifically authorized by the instructor — acts defined as cheating
- (b) The presentation of words or ideas from an existing source as one's own—acts defined as plagiarism
- (c) Other activities that interfere with the educational mission within the classroom

(3) Initially, the instructor will determine whether available facts and circumstances demonstrate that there is reason to believe that a student is involved in an academic irregularity.
- (a) The instructor will, in conference, apprise the student of the instructor's perception of the facts. Early appraisal is desirable.
- (b) If, after this conference, the instructor continues to believe that the student was involved in an academic irregularity, the instructor will mail or give to the student a brief written statement of the charges and the proposed penalty.
- (c) A copy of this statement shall be sent to the department head, who will notify the Office of the Registrar that an electronic notation of the irregularity should be attached to the student's transcript. The notation will be part of the student's internal university record, but will not appear on the printed transcript. If the charges are dropped in the appeal process, or if there is no second offense during the student's stay at the university, the notation will be expunged from the record upon written request from the student following graduation from, or two semesters of nonattendance at, the University.
- (d) The student may appeal the instructor's actions by requesting a departmental conference within 10 days. The conference, held as soon as possible, will include the student, the instructor, and the head of the department administering the course. An advisor may attend to provide counsel to the student, but not to answer in place of the student. The department head's written statement of action taken pursuant to the conference will be delivered to the student and the dean of the college administering the course.

(4) When the department head notifies the Office of the Registrar of the irregularity (section 3c), the registrar will inform the department head as to whether the student

is a repeat offender. If the student is a repeat offender, the department head will recommend to the dean a penalty of suspension or expulsion. The dean will make the decision as to the penalty and notify the student in writing.

(5) The student may appeal the actions of the departmental conference or the dean at a Faculty-student council. This council will be established by each college and will be composed of the dean, two faculty members, and two students. Requests for a hearing must be presented in writing within 10 days of the departmental conference. Records of appeals and minutes will be maintained by the dean. These hearings are considered to be educational activities. The strict rules of evidence do not apply. Students may be assisted by attorneys, but may not abdicate the responsibility to respond to charges to their legal advisors.

(6) The student may appeal the faculty-student council's actions to the provost by requesting a hearing within 10 days of the committee's decision. These appeals are limited to the following:
   (a) Failure to receive due process.
   (b) Arbitrary actions including lack of commensurateness of penalty to offense.
   (c) New pertinent information not available during earlier proceedings.

(7) Penalties will vary with the offense.
   (a) The instructor's penalty (section 3b previous) ranges from a grade of "F" on any work involved up to an "F" in the course.
   (b) Penalty grades cannot be removed by a drop or the forgiveness policy.
   (c) Penalties assigned by the dean (section 4 previous) may include suspension or dismissal.
   (d) Each college or department may adopt a policy of penalties more severe than prescribed above. Such a policy must be widely distributed in the college's or department's courses.

(8) The provost may act on an appeal as follows:
   (a) Dismiss the appeal and uphold the action taken by the college.
   (b) Order a new hearing by a different faculty-student council.
   (c) Reduce the severity of the penalty administered.

(9) Student grievances arising from academic activities require a written request for a conference with the instructor. If unsatisfied, the student may request further discussion in a department conference similar to the one in section (3d) above. Grades will not be changed except by the instructor, and grievances involving the judgment and discretion of a faculty member in assigning grades shall not proceed under this rule beyond the conference with the instructor.

This is an application of the concept of academic freedom. The exception to this rule occurs if the student can demonstrate malice on the part of a faculty member. A grievance involving a charge of malice may be appealed to the faculty-student council, as above, and subsequently to the provost. In the event of a finding of malicious action, the University may take disciplinary action against the faculty member and, at the option of the student, remove the grade from the record and refund the student's fees for the course. Students whose accusations of malice are found to be frivolous by the provost are subject to disciplinary action.

I-M Requirements for Graduation

M.1 Students must complete the graduate program within ten years.

Ten-Year Rule (Recency of Credit)
No credit that is more than ten years old at the time the degree is awarded may be counted toward a graduate degree at Florida Atlantic University. Credits, transferred into or applied to a FAU program, are considered as earned in the first

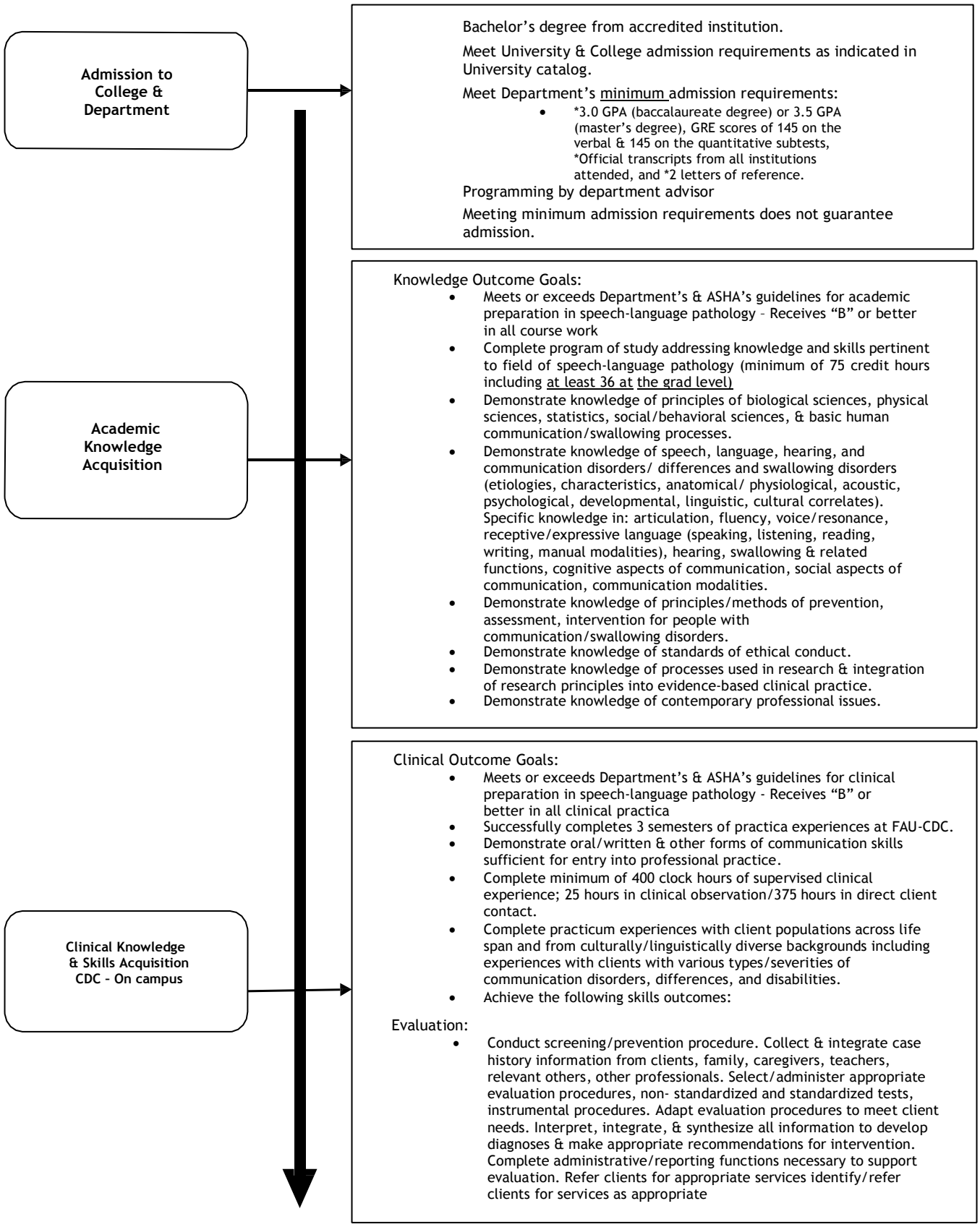
semester of enrollment.

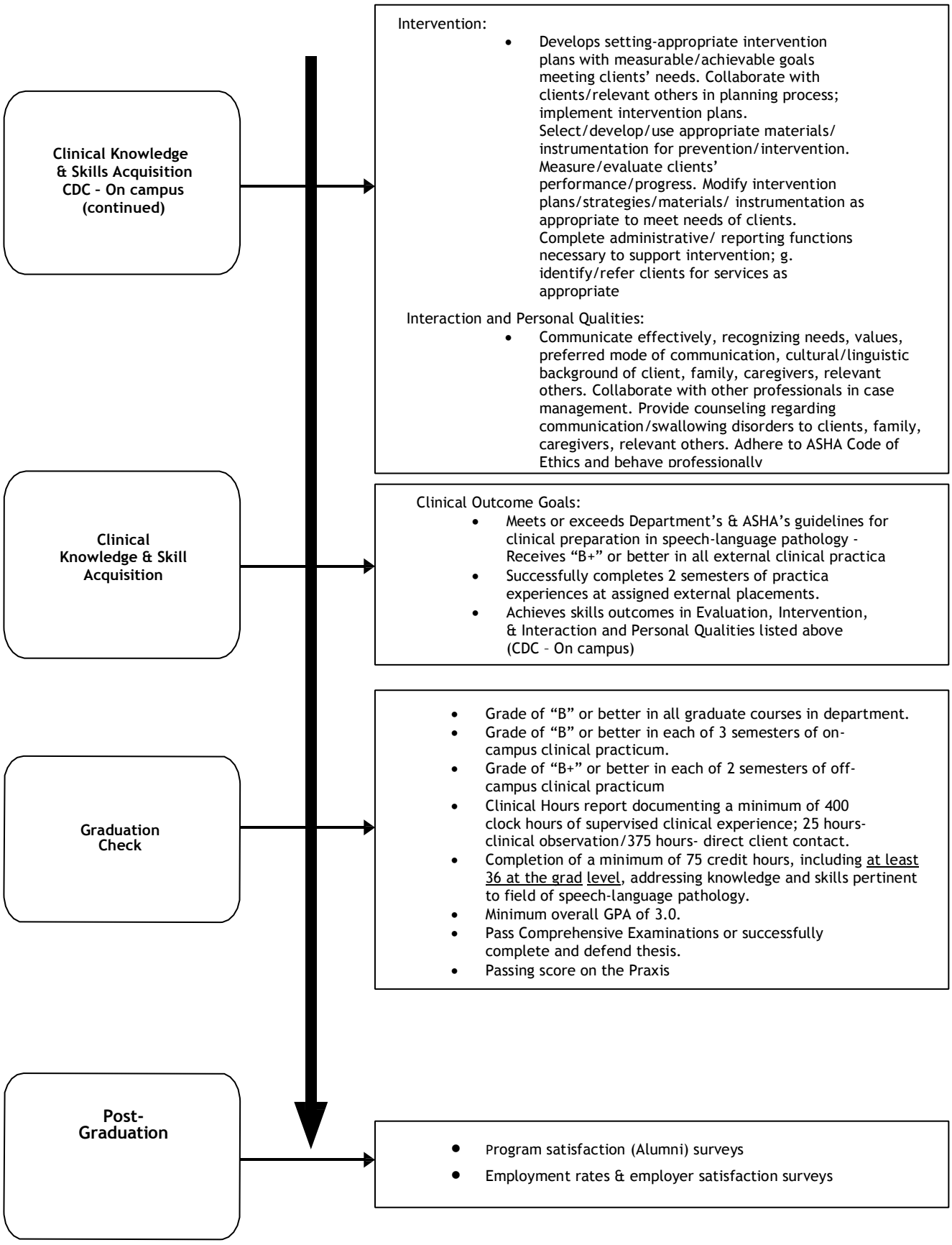
M.2 Students must provide evidence of a passing score on the Praxis (National Examination in Speech Pathology and Audiology) prior to graduation.

M.3 All practicum hour requirements (minimum 400 hrs.) must be completed prior to graduation. Students who do not complete practicum hour requirements must register for (an) additional semester(s) of practicum until hour requirements are met. Students are required to complete each practicum for which they register (adhering to the stated mandatory start and end dates) regardless of whether minimum practicum hour requirements are completed prior to the end of a semester.

M.4 Degree Decision Points (See Below)

COMMUNICATION SCIENCES AND DISORDERS
Master of Science Degree – Speech Pathology and Audiology
Decision Points




Clinical Knowledge & Skills Acquisition CDC – On campus (continued)
Intervention:
Develops setting-appropriate intervention plans with measurable/achievable goals meeting clients' needs. Collaborate with clients/relevant others in planning process; implement intervention plans. Select/develop/use appropriate materials/ instrumentation for prevention/intervention. Measure/evaluate clients' performance/progress. Modify intervention plans/strategies/materials/ instrumentation as appropriate to meet needs of clients. Complete administrative/ reporting functions necessary to support intervention; g. identify/refer clients for services as appropriate
Interaction and Personal Qualities:
Communicate effectively, recognizing needs, values, preferred mode of communication, cultural/linguistic background of client, family, caregivers, relevant others. Collaborate with other professionals in case management. Provide counseling regarding communication/swallowing disorders to clients, family, caregivers, relevant others. Adhere to ASHA Code of Ethics and behave professionally
Clinical Knowledge & Skill Acquisition
Clinical Outcome Goals:
Meets or exceeds Department's & ASHA's guidelines for clinical preparation in speech-language pathology - Receives "B+" or better in all external clinical practica
Successfully completes 2 semesters of practica experiences at assigned external placements.
Achieves skills outcomes in Evaluation, Intervention, & Interaction and Personal Qualities listed above (CDC – On campus)
Graduation Check
Grade of "B" or better in all graduate courses in department.
Grade of "B" or better in each of 3 semesters of on-campus clinical practicum.
Grade of "B+" or better in each of 2 semesters of off-campus clinical practicum
Clinical Hours report documenting a minimum of 400 clock hours of supervised clinical experience; 25 hours-clinical observation/375 hours- direct client contact.
Completion of a minimum of 75 credit hours, including at least 36 at the grad level, addressing knowledge and skills pertinent to field of speech-language pathology.
Minimum overall GPA of 3.0.
Pass Comprehensive Examinations or successfully complete and defend thesis.
Passing score on the Praxis
Post-Graduation
Program satisfaction (Alumni) surveys
Employment rates & employer satisfaction surveys

II. CLINICAL POLICIES AND PROCEDURES

Please note: *This section is designed to serve as an overview, only*. Detailed information on Clinic Policies and Procedures are provided in the "Student Clinician Handbook". Students are expected to adhere strictly to all rules and regulations in the "Student Clinician Handbook" including, but not limited to, hour requirements, attendance, dress code, client and records confidentiality, practicum paperwork requirements and timelines, professional ethics, clinical demeanor, client safety, criminal background checks, malpractice insurance coverage, clinical practicum class attendance, and policies on non- discrimination.

II-A General

A.1 Students found to be in violation of on- or off-campus practicum policies and procedures or in violation of the ASHA Code of Ethics, may, upon faculty/staff review, be dismissed from the program without further cause.

II-B Requirements for On-Campus Clinical Practicum

B.1 Students must complete all prerequisites, SPA 6553, SPA 6204, SPA 6401, SPA 6410, provide documentation of 25 hours of supervised clinical observation, provide documentation of malpractice insurance, successful completion of the FAU HIPAA course, and all other requirements on the clinic website (https://www.fau.edu/education/academicdepartments/csd/clinic/students/practica/) prior to beginning clinical practicum. Paperwork and processing costs/fees are the student's responsibility.

B.2 Students who receive an incomplete, fail, or withdraw from a course (SPA 6553, SPA 6204, SPA 6401, SPA 6410) in the first Fall Semester of the Program will be ineligible for Clinic Class (SPA 6505) the subsequent Spring Semester. Students who receive an incomplete, fail, or withdraw from any of the required (non-elective) courses (SPA's 6230, 6403, 6225, 6322, 6211, 6559, or STA 6113 and EDF 6481) must continue taking credit hours of Clinical Practicum (SPA 6505) until they have successfully completed that course. Re-taking the clinic class will be at the discretion of the instructor. Failing or withdrawing from an academic course in any semester will delay the student's graduation. Any deviation from this policy will need to be petitioned by the student and approved by the faculty.

Policy: Consecutive Sessions of Clinic (SPA 6505)
There are two primary reasons for disruption of SPA 6505. If a student receives an incomplete, fails or withdraws from a course and must re-take it, there is a gap of one year before the course is offered again. The second reason for non-consecutive semesters of clinic is for approved Medical, Personal, or Family Leave. These two situations need two distinct solutions.

Situation #1: Re-Take a Class (due to an incomplete, not passing, or course withdrawal – I/F/W)
SPA 6505 will be taken with a varying credit load. On campus clinical practicum will be offered at one rather than two credits, but the total number of Clinic credits (SPA 6505) would not exceed 14. Depending on the student's situation, Clinic "Class" may be waived and the student would receive a reduced caseload. Since students need a continuum of growth in their clinical skills, practicum needs to be mandatory for each semester.

Yr 1 CDC **Course I/F/W** Spring Semester **Clinic Class**	Yr 1 CDC Summer Semester **Clinic Class**	Yr 2 CDC Fall Semester **Clinic Class**	Yr 2 CDC Spring Semester **Re-take course**	Yr 2 **Extern** Summer Semester **Ext. Clinic Class**	Yr 2 **Extern** Fall Semester **Ext. Clinic Class**
Credits: 2	Credits: 1	Credits: 1	Credits: 2*	Credits: 4	Credits:4

Yr 1 CDC Spring Semester **Clinic Class**	Yr 1 CDC **Course I/F/W** Summer Semester **Clinic Class**	Yr 2 CDC Fall Semester **Clinic Class**	Yr 2 CDC Spring Semester	Yr 2 CDC Summer Semester **Re-take Course**	Yr 3 **Extern** Fall Semester **Ext. Clinic Class**	Yr 3 **Extern** Spring Semester **Ext: Clinic Class**
Credits: 2	Credits: 2	Credits: 1	Credits: 1	Credits: 2*	Credits: 3**	Credits: 3**

Yr 1 CDC Spring Semester **Clinic Class**	Yr 1 CDC Summer Semester **Clinic Class**	Yr 2 CDC Fall Semester **Course I/F/W Clinic Class**	Yr 2 CDC Spring Semester	Yr 2 CDC Summer Semester	Yr 3 CDC Fall Semester **Re-take Course**	Yr 3 **Extern** Spring Semester	Yr 3 **Extern** Summer Semester
Credits: 2	Credits: 2	Credits: 2	Credits: 1	Credits: 1	Credits: 2*	Credits: 2**	Credits: 2**

** Externship semesters will be taken as full-time experiences regardless of the number of registered credits for that semester.

Situation #2: Medical, Personal, or Family Leave
Since the student is on leave, no classes are being taken; therefore, clinic (credits) cannot be offered.
Leave of Absence
Use Simu-Case for Guided Observations (2) for each semester. During the last week of the semester before returning to classes, submit a written report to the clinic director, covering the observations completed during the leave of absence.

B.3 Students must earn a minimum grade of "B" (83 – 86) for each of three semesters of on-campus clinical practicum. Students failing to earn a "B" (e.g. B-, C) will forfeit clinical hours earned during the semester and are required to repeat both the clinical practicum and practicum class.

B.4 The faculty will form a committee for problem students with their advisor and an additional faculty member. Clinical issues for problem students would involve the primary supervisor, clinic director, and a secondary faculty member/supervisor. The committee would set forth an action plan to address the problem the student is facing, and ways to improve their performances.

B.5 Students will be scheduled for clients, during regular clinic hours, when they are not in classes. The clinic director will provide each student with a client assignment/clinic schedule based on practicum experience needs. Students who have time constraints, outside of class times, due to exceptional circumstances e.g. childcare, medical treatment), must petition the department (with specific day and time requests) for a reduction in clinic scheduling availability requirements. (instructions for submitting a petition may be found on page 20 – *Requesting exceptions to policies and procedures*)

The Department of Communication Sciences and Disorders will not be responsible for students who cannot be scheduled for clients because they have schedules with limited availability. Students with restricted schedules should be aware that the time needed to complete practicum requirements will be lengthened. Additionally, students may be asked to withdraw from practicum until they are able to provide more availability for client scheduling.

Specific questions about scheduling should be directed to the Clinic Director.

B.6 On-campus practicum is taken for two credits for each of three semesters. In addition to weekly client treatment hours, the following requirements are mandatory for all students enrolled in SPA 6505:

- weekly clinical practicum class
  Unexcused absences of this mandatory class will result in an automatic reduction of the student's practicum grade for the semester.
- weekly supervisory session, generally ½ hour long, with each of their supervisors.

B.7. Students do not decide whether they will accept a client. Any student refusing to accept a client will be invited to discontinue practicum for the semester. Any exceptional or extenuating circumstance must be petitioned to the department. (instructions for submitting a petition may be found on page 20 – *Requesting exceptions to policies and procedures*)

B.8 Grades of "Incomplete" are not given for practicum. Failure to complete practicum requirements (hours, paperwork, reports, attendance etc.) according to stated timelines will result in an "F" for the semester. The Clinic Director will evaluate extenuating circumstances on a case-by-case basis.

II-C Requirements for Off-Campus Practicum

C.1 Students may begin off-campus practica after successful completion of all prerequisite and core courses (with the following exceptions: SPA 6006, SPA 6559, electives, EDF 6481, and STA 6113) and 3 semesters of on-campus practica (minimum grade of "B" for each practicum semester, a minimum of 100 clinical hours, and 20 hours of audiology practicum). If a necessary course is failed, the student will not be eligible for externship at the expected time. CDC Clinic must be on-going until successful completion of the failed course. In addition, failure to earn a "B" in any on-campus clinical semester will delay graduation and require (an) additional semester(s) of practicum prior to off-campus placement.

C.2 Students must earn a minimum grade of "B+" for each off-campus semester. Failure to earn a "B+" will delay graduation and require (an) additional semester(s) of practicum in order to graduate. Without exception, a final grade below "B+" will justify the need for further direct patient clinical and diagnostic hours. These additional hours will be earned at an additional externship site and/or at the FAU-CDC.

C.3 Under no circumstances are students to negotiate their hours of participation at a placement. Students who do not adhere to the placement hour requirements **AND** the designated start and end dates of the practicum semester will be considered to have failed to meet practicum requirements and will receive a "F" for the semester, as described in item **B.6** above. Students receiving an "F" will not graduate or receive a second placement (if the "F" occurs for the first off-campus placement). The practicum must be repeated and a minimum grade of "B+" must be earned prior to receiving clearance for graduation or the second off-campus placement.

C.4 Students registering for off-campus practicum must register for four credits in each of their two semesters of off-campus practicum. Additionally, students may be required to provide services at the FAU-CDC, as needed, and as off-campus assignments allow.

C.5 Students are required to attend the clinical practicum class, as scheduled. Unexcused absences of this mandatory class will result in an automatic reduction of the student's practicum grade for the semester.

C.6 Under no circumstances are students to negotiate their own off-campus placements. Assignments for off-campus practica sites are based on each student clinician's strengths and skills and are at the discretion of the Clinic Director and the practica facilities (see II-D. Establishment of Relationships with External Facilities). Most facilities require a personal interview prior to deciding a student's suitability for the placement. The decision of the facility is final. If a student is not approved by the facility for the placement, the Clinic Director will discuss other placement options with the student.

Students should be aware that off-campus practica placements may require a reasonable commute from their homes to their placement sites. It is neither possible to nor probable that students will be assigned only to off-campus placements in their towns of residence.

C.7 The majority of off-campus placements require a full-time commitment. Students with restricted schedules should be aware that the availability of sites will be limited and most sites will not accept less than a full-time commitment. This severely hampers, or in many cases prevents, completion of practicum requirements within the generally designated timeframe.

II-D Establishment of Relationships with External Facitlies

D.1. The Initial Contract

Representatives of an external facility are contacted by CDC personnel to inquire whether they are willing to serve as a site for CSD externship students. If the facility is in agreement, an Affiliation Agreement (AA) is emailed to the contact person. During this contact, the clinic personnel will provide the dates of the externship and ask the facility representatives if they have their own contract or legal counsel for procuring a contract, provided there is availability for them to take a student.

Affiliation Agreements are tracked by the clinic director as well as FAU legal counsel. Fully signed AA's are emailed to the facility and kept in an e-file in the FAU Communication Disorders Clinic.

D.2. After the Contract is in Place

After a contract is in place, clinical personnel email a site to ask if they have availability to take a student for the semester. The email states, "It is understood that all externship sites that agree to take a student will provide a qualified supervisor who is giving the amount of supervision ASHA requires within the semester, and the number of clock hours needed (approx. 175 for Spring or Fall semester and 150 for Summer)." In their reply, the facility must indicate that students will receive an adequate number of clock hours with appropriate supervision.

At the beginning of each externship semester, data for each externship site are inputted into CALIPSO, the web-based application used by the CDC to track all aspects of clinical education. These data include supervisor credentials (supervisor state license information and ASHA information), and the site's demographic information. In addition, because most medical systems require the use of American Databank/Complio (or a similar system) as a precursor to taking a student extern, clinical personnel also input university and program data into American Databank/Complio, to track completion of site requirements and to communicate with the student and the facility.

To ensure that each site has the clinical population and qualified personnel to meet the educational needs of our students, it is essential that there is an "open communication" policy at all stages in the externship process. Before the beginning of the semester, each

supervisor is emailed a letter of appreciation and expectations, as well as an invitation to keep open communication during the semester. In this same email, a copy of the Off-Campus Supervisors' Handbook is attached. The Handbook outlines the schedule and courses the students follow, the CDC Policies, responsibilities of supervisors, and ASHA links such as the Code of Ethics and definition of a "clock hour", to provide guidance during the semester.

D.3. The Process of Connecting the Student to the Facility

After a facility has agreed to take or consider a student (pre-interview), and after or simultaneously to a fully executed Affiliation Agreement or Contract, the student is provided with the site information for their externship and the student contacts the site to set up an interview. If, following the interview, the site agrees to the student being placed, clinic personnel provide the student with the requirements of the site from Department e-files or within American Databank/Complio.

D.4. Mid-Semester/Ongoing Communication

The week before Mid-Semester grades are due, a letter entitled, "Middle of Semester Letter" is sent to all supervisors. This letter, like the initial letter and Handbook, informs all supervisors when the Mid-Semester grades are due and the purpose and philosophy behind the grading process. Supervisors are again invited to ask questions and give input, especially if there is a student who is struggling.

Another method of ensuring the quality of our sites is to send liaisons to visit each site at least once every two years. If an on-site visit is not possible due to unforeseen circumstances, a remote meeting or phone call between the liaison and supervisor is held, and an on-site visit will be scheduled for another semester, so that current sites are visited within the two-year window. The informational form completed by the liaisons is kept on file in the FAU Communication Disorders Clinic.

Student Clinicians, in conjunction with their supervisors, complete the Facility Information, Department Information, and Student Information sections of the Site Information Forms. The site supervisor signs the completed course assignment form, attesting that the information is accurate.

D.5. End of Semester Communication and Follow-up: Supervisors and Students

The week before End of Semester grades are due, a letter entitled, "End of Semester Letter" is sent to all supervisors. The letter informs all supervisors about when the End of Semester grades are due and the purpose and philosophy behind the final grading process.

During the final week of the semester, all students are required to complete the "Supervisor Feedback Form" and the "Student Evaluation of Clinical Placement" on CALIPSO. These forms allow the program to further assess the quality and suitability of each facility.

II-E Procedures to ensure competency in all clinical areas

E.1. Documentation of Hours

(a) Students are instructed to submit clock hours that represent all relevant disorders addressed in evaluations and treatment, not just an umbrella category (e.g., a client participating in an adult group session may be addressing the areas of speech, voice, social skills, and cognitive skills).
(b) Students are instructed to select Simu-Case cases in which they have not had any clinical experience.

E.2. Documentation if student did not receive hours in a topic area

If, during the last semester in Clinical Practicum, a student has not had either Clinical experience or Simulated Clinical experience in a disorder (also considering adult/child sub-categories within a disorder) and exhibit a "0" on CALIPSO, each zero will be

accounted for by an explanation of experience, competency, and knowledge gained within a course for a specified topic area, which will be uploaded into that student's file in CALIPSO.

II-F Verification of Supervisors

F.1. The Process of Verification of Supervisors: E-Verification
(a) State Licensure – Search on the Website for Florida Licensure: State of Florida Department of Health, Division of Medical Quality Assurance
(b) ASHA Certification – Search on ASHA Website
(c) Compliance with the 2-CEU supervisor course as well as any other new requirements – Search on ASHA Website

F.2. The Process of Verification of Supervisors: Verification by Paper. State Licensure and ASHA Certification – Email the supervisor and/or Contact Person at the Facility asking for copies of both the ASHA Card and the State License.

F.3. The verification process takes place every January and when acquiring new supervisors, both on and off campus.

F.4. The verification by Websites and Paper will be recorded in CALIPSO under each supervisor's information.

III. THE K-9
(KASA - Knowledge and Skills Assessment)

III-A. Overview

As stated in the ASHA Membership and Certification Handbook, "The American Speech-Language- Hearing Association issues Certificates of Clinical Competence to individuals who present evidence of their ability to provide independent clinical services to persons who have disorders of communication. Individuals who meet the standards specified by the Association's Council For Clinical Certification (CFCC) may be awarded a Certificate of Clinical Competence in Speech- Language Pathology (CCC-SLP).

An applicant for certification must provide evidence that all knowledge and skill requirements, set by the CFCC, have been met. It is important that students be involved, actively in documenting and monitoring progress in their academic and clinical programs. To underscore each student's responsibility in this documentation process, the department has designed a KASA inventory form to coincide with the program's requirements. Using this form, as well as the individual knowledge and skill grids provided in each course, a student may document the acquisition of required academic and clinical knowledge and skills, as well as track progress through the program.

There are nine content areas in which students must exhibit both academic and clinical competencies.

These areas are:

1. Articulation
2. Fluency
3. Voice and resonance, including respiration and phonation
4. Receptive and expressive language in speaking, listening, reading, writing, and manual modalities. (phonology, morphology, syntax, semantics, and pragmatics)
5. Hearing, including the impact on speech and language
6. Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myofunction)
7. Cognitive aspects of communication
   (attention, memory, sequencing, problem-solving, executive functioning)
8. Social aspects of communication
   (challenging behavior, ineffective social skills, lack of communication opportunities)
9. Communication modalities
   (including oral, manual, augmentative and alternative communication techniques, and assistive technologies)

III-B. Department of Communication Sciences and Disorders Department Goals & Objectives

Goal 1: Upon completion of the program, the student will have demonstrated the critical knowledge and skills necessary for entry-level independent practice in the field of speech-language pathology.

Goal 2: Upon completion of the program, the student will have met all of the academic and clinical requirements for the Certificate of Clinical Competence in Speech-Language Pathology, as well as having met the department's standards for academic and clinical excellence.

Objectives:

1. Upon completion of the program, the student will have demonstrated knowledge of basic human communication and swallowing processes, including their biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases.

2. Upon completion of the program, the student will have demonstrated knowledge of the nature of speech, language, hearing, and communication disorders and differences and swallowing disorders, including the etiologies, characteristics, anatomical and physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the K-9.

3. Upon completion of the program, the student will have demonstrated knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical and physiological, psychological, developmental, and linguistic and cultural correlates of the disorders in the K-9.

4. Upon completion of the program, the student will have demonstrated knowledge of the processes used in research and the integration of research principles into evidence- based clinical practice.

5. Upon completion of the program, the student will have demonstrated knowledge of contemporary professional issues.

6. Upon completion of the program, the student will have demonstrated knowledge about certification, specialty recognition, licensure, and other relevant professional credentials.

7. Upon completion of the program, the student will have demonstrated sufficient skill in oral and written communication for entry into professional practice.

8. Upon completion of the program, the student will have demonstrated the interaction and personal qualities requisite for entry into professional practice:
    - Effectively communicate while recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the client/patient, family, caregivers, and relevant others
    - Collaborate with other professionals in case management
    - Provide counseling regarding communication and swallowing disorders to client's patients, family, caregivers, and relevant others
    - Adhere to the ASHA Code of Ethics and behave professionally

IV. MISCELLANEOUS

IV-A. Requesting exceptions to policies and procedures

Any student seeking an exception to a department policy or procedure must submit a formal petition to the department's Petition Committee. The petition should include:

- The policy/procedure to which an exception is being sought,
- A clearly stated rationale/explanation for why the exception is needed or being requested,
- Any appropriate supporting documentation, and
- Timelines, outcomes, and/or consequences, clearly stated/explained, where appropriate.

Additionally, a statement of support from the student's advisor may be requested by the committee. The petition should be submitted to the Chair of the Department's Petition Committee, who will request that the petition be placed on the agenda for the next scheduled department

meeting. Students will be notified in writing of the decision of the Petition Committee. Students can petition for an exception to policies and procedures without the support of their advisors. Lack of advisor support will not prevent consideration of a petition.

IV-B. Process for complaints to or against Council on Academic Accreditation

(CAA) 1. Procedures for Complaints Against Graduate Education Programs

A complaint about any accredited program or program in candidacy status may be submitted by any student, instructional staff member, audiologist, speech-language pathologist, and/or member of the public. All complaints must be signed and submitted in writing to The Council on Academic Accreditation in Audiology and Speech-Language Pathology, American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850 (800-498-2071), and must clearly describe the specific nature of the complaint and the relationship of the complaint to the accreditation standards and provide supporting data for the charge.

Determination of Jurisdiction

Receipt of a complaint is acknowledged and an investigation is initiated by the chair of the CAA within 30 days. The original letter of complaint is placed in a National Office file separate from the program's accreditation file. The chair determines whether the complaint (a) is against an accredited education program or program in candidacy status in audiology and/or speech- language pathology and (b) relates to the standards for accreditation of education programs in audiology and speech-language pathology. If the complaint is from a student or faculty/instructional staff member, the complainant will be required to exhaust all institutional grievance and review mechanisms before submitting a complaint to the CAA. If the chair of the CAA determines that the complaint does not meet the two above-listed criteria, the complainant is informed that the CAA will not investigate the complaint.

Investigation

If the chair of the CAA determines that the complaint satisfies the above-listed criteria, the CAA will investigate the complaint.

A. The chair of the CAA informs the complainant that the Council will proceed with an investigation during which it may be necessary to reveal the identity of the complainant to the affected program or to other potential sources of relevant information. The complainant is given the opportunity to withdraw the complaint. If the complainant does not wish to pursue the matter, the investigation is concluded. If the complainant does not wish to withdraw the complaint, the complainant is asked to keep the initiation of an investigation confidential and to provide any relevant information in support of the allegation.

B. The chair of the CAA notifies the program director and the institution's president or president's designee by certified return-receipt-requested mail that a complaint has been registered against the program. The notification includes information about the nature of the complaint without revealing the identity of the complainant. The program's director and the institution's president or president's designee are requested to provide information they consider relevant to the complaint within 30 days of the date of the notification letter.

C. The chair of the CAA notifies CAA members that a complaint has been registered and that an investigation has begun. Notification includes information about the nature of the complaint. The identity of the complainant and the program under investigation is not revealed to the members of the CAA or to recipients of requests for information, unless a majority of CAA members consider such disclosure necessary for the proper investigation of the complaint. If the majority of Council members conclude that persons other than the complainant, the program director, and the institution's president or president's designee may have information relevant to the complaint, the chair of the CAA requests such information.

D. After reviewing all relevant information, the CAA determines the course of action. Such actions may include, but are not limited to:

- Dismissing the complaint
- Recommending changes in the program within a specified period of time
- Continuing the investigation through an on-site visit to the program
- Placing the program on probation
- Withholding/withdrawing accreditation

E. If the CAA determines that a site visit is necessary, the program director and the institution's president or president's designee are notified, and a date for the site visit is expeditiously scheduled. The program pays for expenses of the site visit. The investigatory team is selected from the current roster of CAA site visitors. During the site visit, emphasis is given to those standards with which the program is allegedly not in compliance. The site visit team submits a written report to the CAA no later than 30 days following the site visit. As with all other site visits, only the observations of the site visitors are reported; site visitors do not make recommendations. The CAA forwards the report to the program director and the institution's president or president's designee. The program or institution should provide a written response to the chair of the CAA within 30 days of the postmarked date on which the report is forwarded to the program director and the president or president's designee. The purpose of the response is to verify the accuracy of the site visit report.

F. The CAA reviews all evidence before it, including the site visit report and the program's response to the report, and takes one of the following actions:

- Dismiss the complaint
- Recommend modifications of the program within a specified period of time
- Place the program on probation
- Withhold/withdraw accreditation

G. If the CAA withholds/withdraws accreditation, the program director and the institution's president or president's designee are informed that accreditation has been withheld/ withdrawn. Notification also includes justification for the decision and informs the program of its option to request a Further Consideration review. If the program chooses to request Further Consideration, the request must be received by the CAA within 30 days from the date of the notification letter. Further Consideration is the mechanism whereby the program can present documentary evidence of compliance with the appropriate standards. By exercising this prerogative, the program asks the CAA to reevaluate its decision to withhold/withdraw accreditation. With the request for Further Consideration, the program must submit documentation to justify why accreditation should not be withheld/withdrawn. If the program does not exercise its Further Consideration option, the CAA's decision to withhold/withdraw accreditation cannot be appealed.

H. Within 2 months of receiving the program's response to the Further Consideration, the CAA makes a decision to dismiss the complaint or to withhold/withdraw accreditation, and the chair of the CAA notifies the program director and the institution's president or president's Designee. Notice of withholding or withdrawal of accreditation includes a statement justifying the decision. If accreditation is withheld/withdrawn, the chair of the CAA notifies the secretary of the U. S. Department of Education at the same time the program is notified.

2. Procedures for Complaints Against the Council

Complaints against the Council on Academic Accreditation may be lodged by any student, instructional staff member, audiologist, speech-language pathologist, and/or member of the public. All complaints must be signed and in writing to The Council on Academic Accreditation in Audiology and Speech-Language Pathology, American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850 (800-498-2071).

Determination of Jurisdiction
Receipt of a complaint is acknowledged and an investigation is initiated by the chair of the CAA within 30 days of the day the complaint is received. The original letter of complaint is filed in the ASHA National Office. The chair of the CAA determines whether the complaint relates to the accreditation process, decisions, or actions or activities of the Council or Council members.

If the chair determines that the complaint does not meet the above criteria, the CAA will not investigate the complaint.

Investigation
If the chair of the CAA determines that the complaint meets the above criteria, the CAA must investigate the complaint.

A. The chair of the CAA informs the complainant that the Council will proceed with an investigation during which it may be necessary to identify the complainant to the Council, a review committee, or other sources of relevant information. The complainant is asked to keep the initiation of an investigation confidential and to provide all relevant information in support of the allegation.

B. The chair of the CAA notifies CAA members that a complaint has been registered against the Council and that the Council will proceed with an investigation. Notification includes information about the nature of the complaint. The identity of the complainant is not revealed to members of the CAA.

C. The chair of the CAA shall appoint a Review Committee to review the complaint against the Council. To assure that the committee is thoroughly familiar with accreditation standards and Council policies and procedures, the Committee shall consist of three past members of the CAA or its predecessor body (ESB) who have served during the preceding 5 years. The Review Committee shall consider the complaint, including supporting documents, within 60 days of the date material related to the complaint is mailed to the Committee from National Office. After reviewing all relevant information, the Review Committee will recommend a course(s) of action. Such recommendations may include, but are not limited to:

- Dismissing the complaint
- Recommending changes in Council policies and procedures within a specified time period

D. Within 30 days of the conclusion of its investigation, the Review Committee will forward its recommendations to the chair of the CAA. Such recommendations will be disseminated to members of the CAA for their review. A full discussion of the recommendations of the Review Committee shall be placed on the agenda for the next regularly scheduled meeting of the CAA and for consideration of appropriate Council action. In the event that more immediate action is required, the chair of the CAA may conduct a vote of Council members.

E. The complainant shall be notified of Council action on the complaint within days of the Council's decision in the matter. Decisions of the Council relative to complaints may not be appealed.

IV-C. University Policy - Exceptional Circumstances/Medical Withdrawals Advising

WITHDRAWAL REQUESTS submitted are for ALL classes and should be submitted during the semester for which the withdrawal is requested. Applications submitted after the semester ends, but within six months of the illness, injury or death may be considered if the student's documents demonstrate that the failure to apply in a timely manner was beyond the control of the student.

Qualifying Reasons for an Exceptional Circumstances withdrawal are:

- Medical/Mental Illness of the Student: Illness of a student of such severity or duration, to preclude completion of all courses, employment, and activities of daily life.
- Death in Immediate Family ONLY - Mother, Father, Spouse, Siblings, Grandparents or Children of Student.
- Involuntary call to Military Duty ONLY.

Required Documentation:

- Request for Exceptional Circumstances Withdrawal Form: Complete and Sign the Form
- Letter of Explanation: A letter, written by the student, explaining the reason for the withdrawal request and signed by the student.
- Release of Medical Information: Complete and Sign the Form

Acceptable documentation for one of the following: Medical/Mental Illness:

- Diagnosis (DSM/ICD) and Prognosis and dates of treatment. Must be on Health Care Provider's letterhead, and include the physician's name, title, date, and signature of the provider. Notes on prescription pads WILL NOT be accepted.
- The reason the condition prevents successful completion of ALL courses.
- The date the patient will be able to resume full academic responsibilities.

Death in Immediate Family:

- Requires Death Certificate

Military:

- Requires copy of Military Orders

PROCEDURE:

- Completed forms will be submitted to the Exceptional Circumstances Withdrawal Committee (ECW) for review. The ECW Committee, which is made up of university employees and includes healthcare professionals, meets bi/monthly and will determine if there is just cause for a withdrawal due to exceptional circumstances.
- In ALL cases of Medical/Mental Illness Withdrawals, an administrative hold may be placed on the student's upcoming registration until clearance is given by the attending physician/clinician, in writing, indicating that the student is now well enough to return to school. The ECW Committee will determine whether or not the student can resume classes for the upcoming semester.
- If the withdrawal is approved, a "WM" will replace the grades. Documentation must be in English, or be translated to English, and the translator's signature must be notarized. The translator must be someone other than the student or a relative of the student.
- Please refer to the "Student Handbook" for the complete policy on Withdrawals for Exceptional Circumstances.
- Student Appeal Process: Students who are denied a Withdrawal for Exceptional Circumstances may appeal the decision to the Dean of Student Affairs, in writing, within three (3) days of receipt of the letter.

Completed forms with required documents must be returned to the:
DEAN OF STUDENT AFFAIRS OFFICE
FLORIDA ATLANTIC
UNIVERSITY SSB#8, ROOM 226
777 GLADES ROAD
BOCA RATON, FLORIDA 33431

IV-D. University Policy – Religious Accommodation

In accordance with rules of the Florida Board of Education and Florida law, students have the right to reasonable accommodations from the University in order to observe religious practices and beliefs with regard to admissions, registration, class attendance, and the scheduling of examinations and work assignments.

Students who wish to be excused from course work, class activities, or examinations must notify the instructor in advance of their intention to participate in religious observation and request an excused absence. The instructor will provide a reasonable opportunity to make up such excused absences.

Any student who feels aggrieved regarding religious accommodations may present a grievance to the director of Equal Opportunity Programs. Any such grievances will follow Florida Atlantic University's established grievance procedure regarding alleged discrimination.

IV-E University Graduate Grading Policy

The grades of "A" through "C," and "S" are passing grades. The grades of "B-, " "C+," and "C," while considered passing for undergraduate students, are indicative of unsatisfactory work for graduate students and may not be accepted for some courses. The grades of "C-," "D+," "D," "D-," "F," and "U" are failing grades.

No credits are earned in courses in which grades of "AU," "CR," "F," " I," "U," "W", or "WM" are received. The grades "S" and "U" are used to indicate satisfactory or unsatisfactory performance in courses approved for such grading. The Pass/Fail (P/F) option is not available for graduate courses. All thesis/dissertation grading will be "S" or "U."

A student who registers for a course but fails to meet the course requirements, without officially dropping the course, will receive a grade of "F" in the course. See Drop/Add section. In extraordinary circumstances, the faculty may record "NR," (No Reported Grade) which will appear on the transcript as "NR" until the situation is resolved.

IV-F University Policy – Graduate Programs

F.1 Satisfactory Academic Performance

To remain in good academic standing, each graduate student at Florida Atlantic University must maintain a satisfactory record. For all graduate students, a satisfactory record is defined as an average of "B" or higher on all work attempted (3.0 on a 4.0 scale) at Florida Atlantic University by the end of the second term of enrollment and all
subsequent terms. This is the minimum quality necessary for a graduate degree at Florida Atlantic University

F.2 Dismissal

A graduate student who ceases to be in good standing must attain a 3.0 cumulative average within the next two semesters in which the student is enrolled, including summer semesters. Further registration as a degree-seeking student will not be permitted. With the approval of the program, however, dismissed graduate students may continue to take courses as non-degree students.

Individual departments and programs may have stricter standards of satisfactory scholarship than the above University standards. Descriptions of such standards are included in the programs' sections in this catalog or in other materials provided to all students in the program. If students fail to maintain satisfactory scholarship with

respect to these program standards, they may be dismissed by the program.

IV.G University Policy – Continuous Enrollment

Graduate students are required to enroll for at least one credit during at least two semesters (fall, spring, or summer) of every academic year in order to remain eligible for the degree. Students who have been admitted to candidacy normally should enroll in the Thesis (6971) or Dissertation (7980) course in their departments. Those who have not yet been admitted to candidacy, but do not need to take additional courses, should enroll in an appropriate Directed Independent Study course.

Students who fail to maintain continuous enrollment, as defined above, lose their eligibility for the degree. Eligibility may be restored by the Office of Graduate Studies upon appeal by the student. In such cases, students may be required to register for additional credits of Directed Independent Study, Thesis, or Dissertation, in an amount equal to the number of such credits missed while not continuously enrolled.

Graduate students who find it necessary to temporarily suspend their studies may apply for a leave of absence from graduate study. Leave of absence is intended for students who are unable to pursue their studies at all, rather than for students who are actively working on a thesis or dissertation after completing course work. Leave of absence is approved by the Office of Graduate Studies on the basis of the recommendation of the student's faculty advisor, department chair, and college dean.

IV.H University Policy – Sexual

Harassment SEXUAL HARASSMENT

REGULATION 5.010

1. GENERAL STATEMENT

Sexual Harassment is a form of employee or student misconduct that undermines the integrity of the working or learning relationship. All members of the University community are entitled to study and work in an atmosphere free from any form of sexual harassment. Therefore, it is a violation of this rule for any employee or student to engage in conduct constituting sexual harassment. It is also a violation of this rule to retaliate against anyone who complains of sexual harassment or who participates in a proceeding related to a sexual harassment complaint.

2. DEFINITION OF SEXUAL HARASSMENT

(a) For purposes of this rule, sexual harassment is defined as any unwelcome sexual advances, requests for sexual favors, or other communication or physical conduct of a sexual nature from any person when:

1. Submission to such conduct or request is made either explicitly or implicitly a term or condition of an individual's employment; or
2. Submission to such conduct or request is made either explicitly or implicitly a term or condition of academic achievement; or
3. Submission to or rejection of such conduct or request by an individual is used as the basis for an employment or academic decision affecting such individual; or
4. Such conduct or request unreasonably interferes with an individual's work or academic performance or creates an intimidating, hostile, or offensive environment for working or learning.

(b) The definition of sexual harassment excludes the use of sexual material in a classroom setting for academic purposes.

3. RESPONSIBILITIES

(a) All members of the University community are responsible for ensuring that their conduct does not sexually harass any member of the University community.

(b) Third parties doing business with the University are responsible for ensuring that their conduct and the conduct of their employees or agents do not sexually harass any member of the University community.

4. REPORTING OF SEXUAL HARASSMENT

The University's Sexual Harassment Policy is designed to protect all members of the University community. The responsibility for reporting incidents of sexual harassment rests with the members of the University community.

(a) Employees
Employees who have been sexually harassed report the facts and circumstances of sexual harassment to the director of Equal Opportunity Programs or to any of the following, who in turn, must notify the director of Equal Opportunity Programs: immediate supervisors, directors, department/division heads, college deans, vice presidents, university provost, or director of Personnel Services.
Employees who observe or learn of conduct that they reasonably believe to be sexual harassment report the facts and circumstances to the director of Equal Opportunity Programs or to any of the following, who in turn, must notify the director of Equal Opportunity Programs: immediate supervisors, directors, department/division heads, college deans, vice presidents, university provost, or director of Personnel Services.

(b) Students
Students who have been sexually harassed report the facts and circumstances to the director of Equal Opportunity Programs or to any of the following, who in turn, must notify the director of Equal Opportunity Programs: supervisors of the department involved, department/division chairs, directors, department/division heads, college deans, vice presidents, dean of students, university provost, or director of Personnel Services.
Students who learn or observe conduct that they reasonably believe to be sexual harassment report the facts and circumstances to any of the following, who in turn, must notify the director of Equal Opportunity Programs: supervisors of the department involved, department/division chairs, directors, department/division heads, college deans, vice presidents, dean of students, university provost, or director of Personnel Services. Students may also report the matter to the director of Equal Opportunity Programs.

5. FILING A COMPLAINT

A complaint must be filed with the director of Equal Opportunity Programs within one-hundred- eighty (180) calendar days after the last incident of alleged sexual harassment. The filing of a complaint under this policy, whether the complaint is dismissed or not, does not preclude the complainant from also filing a complaint with the Florida Commission on Human Relations or the Federal Equal Employment Opportunity Commission (EEOC) or the Federal Office of Civil Rights (OCR) and has no effect on the filing time limits of those agencies.

6. PROCESSING COMPLAINTS

(a) Upon receipt of a complaint, written or oral, the director of Equal Opportunity Programs discusses the complaint with the complainant and the alleged offender.

(b) The Director of Equal Opportunity Programs discusses the receipt of the complaint with the supervisor of the alleged offender.

(c) The Director of Equal Opportunity Programs attempts a resolution satisfactory to the complainant, the alleged offender, and the University within fifteen (15) days.

(d) If the complaint is not resolved within fifteen (15) days, the director of Equal Opportunity Programs interviews witnesses and reviews documents.

(e) This review should conclude within seventy-five (75) days. If additional time is required, the complainant and alleged offender will be notified in writing no less than ten (10) days prior to the seventy-five (75) day deadline of the reason(s) for the delay and the expected date of completion.

(f) The Director of Equal Opportunity Programs submits a report to the appropriate vice president or the associate provost (Boca Raton campus). In the case of a student, the report will go to the dean of students. In the event any of the above is the alleged offender in a complaint, the report will instead be submitted to his or her immediate supervisor.

7. DISCIPLINARY ACTION

(a) Any member of the University community found to have violated this rule shall be subject to disciplinary action up to and including dismissal or expulsion.

(b) Any member of the University community in a supervisory capacity who has knowledge by direct observation or by receipt of a complaint of sexual harassment involving anyone he or she supervises must report the matter directly to the director of Equal Opportunity Programs. Any supervisor who fails to report the matter directly to the director of Equal Opportunity Programs will be subject to disciplinary action up to and including dismissal.

(c) Where the alleged offender is an employee, the report described in paragraph 6.(f) of this rule will be reviewed by the vice president or associate provost (Boca Raton campus). The vice president or associate provost will determine, in consultation with the Office of Equal Opportunity Programs and the Director of Personnel Services, if disciplinary action is warranted, and if so, the nature of the disciplinary action to be taken.

(d) The factors to be considered in making this determination include the nature and severity of the harassment, any prior warnings given to the alleged offender, any prior incidents of harassment by the offender, and the facts and circumstances of the case.

(e) Where the alleged offender is a student, the report described in paragraph 6.(f) of this rule will be reviewed by the dean of students. The dean of students will handle the matter in accordance with the Student Conduct Code.

(f) All disciplinary action shall be subject to applicable University rules and collective bargaining agreement provisions.

V. 2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology
Effective Date: January 1, 2020

Introduction
The Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) is a semi-autonomous credentialing body of the American Speech-Language-Hearing Association (ASHA). The charges to the CFCC are to define the standards for clinical certification; to apply those standards in granting certification to individuals; to have final authority to withdraw certification in cases where certification has been granted on the basis of inaccurate information; and to administer the certification maintenance program.

A Practice and Curriculum Analysis of the Profession of Speech-Language Pathology was conducted in 2017 under the auspices of the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) and the CFCC. The survey analysis was reviewed by the CFCC, and the following standards were developed to better fit current practice models.

The 2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) go into effect on January 1, 2020. View the SLP Standards Crosswalk [PDF] and consult Changes to Speech-Language Pathology Standards for more specific information on how the standards will change.

Terminology
Clinical educator: Refers to and may be used interchangeably with supervisor, clinical instructor, and preceptor

Individual: Denotes clients, patients, students, and other recipients of services provided by the speech-language pathologist.

Citation
Cite as: Council for Clinical Certification in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association. (2018). 2020 Standards for the Certificate of Clinical Competence in Speech-Language Pathology. Retrieved from /certification/2020-SLP-Certification-Standards.

The Standards for the CCC-SLP are shown in bold. The CFCC implementation procedures follow each standard.

- Standard I—Degree
- Standard II—Education Program
- Standard III—Program of Study
- Standard IV—Knowledge Outcomes
- Standard V—Skills Outcomes
- Standard VI—Assessment
- Standard VII—Speech-Language Pathology Clinical Fellowship
- Standard VIII—Maintenance of Certification

Standard I: Degree
The applicant for certification (hereafter, “applicant”) must have a master's, doctoral, or other recognized post-baccalaureate degree.
Standard II: Education Program
All graduate coursework and graduate clinical experience required in speech-language pathology must have been initiated and completed in a CAA-accredited program or in a program with CAA candidacy status.
Implementation: The applicant’s program director or official designee must complete and submit a program director verification form. Applicants must submit an official graduate transcript or a letter

from the registrar that verifies the date on which the graduate degree was awarded. The official graduate transcript or letter from the registrar must be received by the ASHA National Office no later than one (1) year from the date on which the application was received. Verification of the applicant's graduate degree is required before the CCC-SLP can be awarded.

Applicants educated outside the United States or its territories must submit documentation that coursework was completed in an institution of higher education that is regionally accredited or recognized by the appropriate regulatory authority for that country. In addition, applicants outside the United States or its territories must meet each of the standards that follow.

Standard III: Program of Study

The applicant must have completed a program of study (a minimum of 36 semester credit hours at the graduate level) that includes academic coursework and supervised clinical experience sufficient in depth and breadth to achieve the specified knowledge and skills outcomes stipulated in Standards IV-A through IV-G and Standards V-A through V-C.

Implementation: The minimum of 36 graduate semester credit hours must have been earned in a program that addresses the knowledge and skills pertinent to the ASHA *Scope of Practice in Speech-Language Pathology* .

Standard IV: Knowledge Outcomes

Standard IV-A

The applicant must have demonstrated knowledge of statistics as well as the biological, physical, and social/behavioral sciences.

Implementation: Coursework in statistics as well as in biological, physical, and social/behavioral sciences that is specifically related to communication sciences and disorders (CSD) may not be applied for certification purposes to this category unless the course fulfills a general university requirement in the statistics, biology, physical science, or chemistry areas.

Acceptable courses in biological sciences should emphasize a content area related to human or animal sciences (e.g., biology, human anatomy and physiology, neuroanatomy and neurophysiology, human genetics, veterinary science). Chemistry and physics are important for the foundational understanding of the profession of speech-language pathology. For all applicants who apply beginning January 1, 2020, courses that meet the physical science requirement must be in physics or chemistry. Program directors must evaluate the course descriptions or syllabi of any courses completed prior to students entering their programs to determine if the content provides foundational knowledge in physics or chemistry. Acceptable courses in social/behavioral sciences should include psychology, sociology, anthropology, or public health. A stand-alone course in statistics is required. Coursework in research methodology in the absence of basic statistics cannot be used to fulfill this requirement.

Standard IV-B

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

Standard IV-C

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, and anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

- Speech sound production, to encompass articulation, motor planning and execution, phonology, and accent modification
- Fluency and fluency disorders
- Voice and resonance, including respiration and phonation
- Receptive and expressive language, including phonology, morphology, syntax, semantics, pragmatics (language use and social aspects of communication), prelinguistic communication, paralinguistic communication (e.g., gestures, signs, body language), and literacy in speaking, listening, reading, and writing
- Hearing, including the impact on speech and language
- Swallowing/feeding, including (a) structure and function of orofacial myology and (b) oral, pharyngeal, laryngeal, pulmonary, esophageal, gastrointestinal, and related functions across the life span
- Cognitive aspects of communication, including attention, memory, sequencing, problem solving, and executive functioning

- Social aspects of communication, including challenging behavior, ineffective social skills, and lack of communication opportunities
- Augmentative and alternative communication modalities

Implementation: It is expected that coursework addressing the professional knowledge specified in this standard will occur primarily at the graduate level.

Standard IV-D

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for persons with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

Standard IV-E

The applicant must have demonstrated knowledge of standards of ethical conduct.

Implementation: The applicant must have demonstrated knowledge of the principles and rules of the current ASHA *Code of Ethics* .

Standard IV-F

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

Implementation: The applicant must have demonstrated knowledge of the principles of basic and applied research and research design. In addition, the applicant must have demonstrated knowledge of how to access sources of research information and must have demonstrated the ability to relate research to clinical practice.

Standard IV-G

The applicant must have demonstrated knowledge of contemporary professional issues.

Implementation: The applicant must have demonstrated knowledge of professional issues that affect speech-language pathology. Issues include trends in professional practice, academic program accreditation standards, ASHA practice policies and guidelines, educational legal requirements or policies, and reimbursement procedures.

Standard IV-H

The applicant must have demonstrated knowledge of entry level and advanced certifications, licensure, and other relevant professional credentials, as well as local, state, and national regulations and policies relevant to professional practice.

Standard V: Skills Outcomes

Standard V-A

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

Implementation: Applicants are eligible to apply for certification once they have completed all graduate-level academic coursework and clinical practicum and have been judged by the graduate program as having acquired all of the knowledge and skills mandated by the current standards.

The applicant must have demonstrated communication skills sufficient to achieve effective clinical and professional interaction with persons receiving services and relevant others. For oral communication, the applicant must have demonstrated speech and language skills in English, which, at a minimum, are consistent with ASHA's current position statement on students and professionals who speak English with accents and nonstandard dialects. In addition, the applicant must have demonstrated the ability to write and comprehend technical reports, diagnostic and treatment reports, treatment plans, and professional correspondence in English.

Standard V-B

The applicant must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

1. Evaluation

a. Conduct screening and prevention procedures, including prevention activities.

b. Collect case history information and integrate information from clients/patients, family, caregivers, teachers, and relevant others, including other professionals.

c. Select and administer appropriate evaluation procedures, such as behavioral observations, nonstandardized and standardized tests, and instrumental procedures.

d. Adapt evaluation procedures to meet the needs of individuals receiving services.

e. Interpret, integrate, and synthesize all information to develop diagnoses and make appropriate recommendations for intervention.

f. Complete administrative and reporting functions necessary to support evaluation.
g. Refer clients/patients for appropriate services.
2. Intervention
a. Develop setting-appropriate intervention plans with measurable and achievable goals that meet clients'/patients' needs. Collaborate with clients/patients and relevant others in the planning process.
b. Implement intervention plans that involve clients/patients and relevant others in the intervention process.
c. Select or develop and use appropriate materials and instrumentation for prevention and intervention.
d. Measure and evaluate clients'/patients' performance and progress.
e. Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients.
f. Complete administrative and reporting functions necessary to support intervention.
g. Identify and refer clients/patients for services, as appropriate.
3. Interaction and Personal Qualities
a. Communicate effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the individual(s) receiving services, family, caregivers, and relevant others.
b. Manage the care of individuals receiving services to ensure an interprofessional, team-based collaborative practice.
c. Provide counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others.
d. Adhere to the ASHA *Code of Ethics*, and behave professionally.
Implementation: The applicant must have acquired the skills listed in this standard and must have applied them across the nine major areas listed in Standard IV-C. These skills may be developed and demonstrated through direct clinical contact with individuals receiving services in clinical experiences, academic coursework, labs, simulations, and examinations, as well as through the completion of independent projects.
The applicant must have obtained a sufficient variety of supervised clinical experiences in different work settings and with different populations so that the applicant can demonstrate skills across the ASHA *Scope of Practice in Speech-Language Pathology*. *Supervised clinical experience* is defined as clinical services (i.e., assessment/diagnosis/evaluation, screening, treatment, report writing, family/client consultation, and/or counseling) related to the management of populations that fit within the ASHA *Scope of Practice in Speech-Language Pathology* .
These experiences allow students to:

- interpret, integrate, and synthesize core concepts and knowledge;
- demonstrate appropriate professional and clinical skills; and
- incorporate critical thinking and decision-making skills while engaged in prevention, identification, evaluation, diagnosis, planning, implementation, and/or intervention.

Supervised clinical experiences should include interprofessional education and interprofessional collaborative practice, and should include experiences with related professionals that enhance the student's knowledge and skills in an interdisciplinary, team-based, comprehensive service delivery model.
Clinical simulations (CS) may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive).These supervised experiences can be synchronous simulations (real-time) or asynchronous (not concurrent in time) simulations.
Clinical educators of clinical experiences must hold current ASHA certification in the appropriate area of practice during the time of supervision. The supervised activities must be within the ASHA *Scope of Practice in Speech-Language Pathology* in order to count toward the student's ASHA certification requirements.
A minimum of 9 months of full-time clinical experience with clients/patients, after being awarded the CCC, is required in order for a licensed and certified speech-language pathologist to supervise graduate clinicians for the purposes of ASHA certification. Individuals who have been clinical educators may consider that as "clinical" experience (1) if they are working directly with clients/patients and clinical students, and (2) if they are the patients' recognized provider and as such are ultimately responsible for the care of the clients/patients with whom the student clinicians are

working. Individuals whose experience includes only classroom teaching, research/lab work, teaching only clinical methods, or working with only CS, cannot count such experience as "clinical."

Standard V-C

The applicant must complete a minimum of 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Twenty-five hours must be spent in guided clinical observation, and 375 hours must be spent in direct client/patient contact.

Implementation: Guided clinical observation hours generally precede direct contact with clients/patients. Examples of guided observations may include but are not limited to the following activities: debriefing of a video recording with a clinical educator who holds the CCC-SLP, discussion of therapy or evaluation procedures that had been observed, debriefings of observations that meet course requirements, or written records of the observations. It is important to confirm that there was communication between the clinical educator and observer, rather than passive experiences where the student views sessions and/or videos. It is encouraged that the student observes live and recorded sessions across settings with individuals receiving services with a variety of disorders and completes debriefing activities as described above. Evidence of guided observations may include documentation of hours, dates, activities observed, and signatures from the clinical educator.

The guided observation and direct client/patient contact hours must be within the ASHA *Scope of Practice in Speech-Language Pathology* and must be under the supervision of a clinician who holds current ASHA certification in the appropriate profession and who, after earning the CCC-SLP, has completed (1) a minimum of 9 months of post-certification, full-time experience and (2) a minimum of 2 hours of professional development in the area of clinical instruction/supervision. Guided clinical supervision may occur simultaneously during the student's observation or afterwards through review and approval of the student's written reports or summaries. Students may use video recordings of client services for observation purposes.

Applicants should be assigned practicum only after they have acquired a base of knowledge sufficient to qualify for such experience. Only direct contact (e.g., the individual receiving services must be present) with the individual or the individual's family in assessment, intervention, and/or counseling can be counted toward practicum. When counting clinical practicum hours for purposes of ASHA certification, only the actual time spent in sessions can be counted, and the time spent cannot be rounded up to the nearest 15-minute interval.

Up to 20% (i.e., 75 hours) of direct contact hours may be obtained through CS methods. Only the time spent in active engagement with CS may be counted. CS may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). Debriefing activities may not be included as clinical clock hours.

Although several students may observe a clinical session at one time, clinical practicum hours should be assigned only to the student who provides direct services to the individual receiving services or the individual's family. Typically, only one student at a time should be working with a client in order to count the practicum hours. Several students working as a team may receive credit for the same session, depending on the specific responsibilities that each student is assigned when working directly with the individual receiving services. The applicant must maintain documentation of their time spent in supervised practicum, and this documentation must be verified by the program in accordance with Standards III and IV.

Standard V-D

At least 325 of the 400 clock hours of supervised clinical experience must be completed while the applicant is enrolled in graduate study in a program accredited in speech-language pathology by the CAA.

Implementation: A minimum of 325 clock hours of supervised clinical practicum must be completed while the student is enrolled in the graduate program. At the discretion of the graduate program, hours obtained at the undergraduate level may be used to satisfy the remainder of the requirement.

Standard V-E

Supervision of students must be provided by a clinical educator who holds ASHA certification in the appropriate profession and who, after earning the CCC-A of CCC-SLP, has completed (1) a minimum of 9 months of full-time clinical experience, and (2) a minimum of 2 hours of professional development in clinical instruction/supervision.

The amount of direct supervision must be commensurate with the student's knowledge, skills, and experience; must not be less than 25% of the student's total contact with each client/patient; and must take place periodically throughout the practicum. Supervision must be sufficient to ensure the

welfare of the individual receiving services.
Implementation: Beginning January 1, 2020, clinical educators and clinicians who are involved in the preparation of student clinicians, and who provide guided observation and supervision of clinical practicum hours, must (a) hold the CCC-A or CCC-SLP and have completed a minimum of 9 months of full-time, post-certification (or its part-time equivalent) clinical experience, and (b) must complete 2 hours of professional development/continuing education in clinical instruction/supervision. The professional development/continuing education must be completed after being awarded ASHA certification and prior to the supervision of a student. Direct supervision must be in real time. A clinical educator must be available and on site to consult with a student who is providing clinical services to the clinical educator's client. Supervision of clinical practicum is intended to provide guidance and feedback and to facilitate the student's acquisition of essential clinical skills.
In the case of CS, asynchronous supervision must include debriefing activities that are commensurate with a minimum of 25% of the clock hours earned for each simulated individual receiving services.
Standard V-F
Supervised practicum must include experience with individuals across the life span and from culturally/linguistically diverse backgrounds. Practicum must include experience with individuals with various types and severities of communication and/or related disorders, differences, and disabilities.
Implementation: The applicant must demonstrate direct clinical experiences with individuals in both assessment and intervention across the lifespan from the range of disorders and differences named in Standard IV-C.
Standard VI: Assessment
The applicant must have passed the national examination adopted by ASHA for purposes of certification in speech-language pathology.
Implementation: Results of the Praxis® Examination in Speech-Language Pathology must be submitted directly to ASHA from the Educational Testing Service (ETS). The certification standards require that a passing exam score be earned no earlier than 5 years prior to the submission of the application and no later than 2 years following receipt of the application. If the exam is not successfully passed and reported within the 2-year application period, the applicant's certification file will be closed. If the exam is passed or reported at a later date, then the applicant will be required to reapply for certification under the standards in effect at that time.
Standard VII: Speech-Language Pathology Clinical Fellowship
The applicant must successfully complete a Speech-Language Pathology Clinical Fellowship (CF).
Implementation: The CF experience may be initiated only after completion of all graduate credit hours, academic coursework, and clinical experiences required to meet the knowledge and skills delineated in Standards IV and V. The CF experience must be initiated within 24 months of the date on which the application for certification is received. Once the CF has been initiated, it must be completed within 48 months of the initiation date. For applicants completing multiple CFs, all CF experiences related to the application must be completed within 48 months of the date on which the first CF was initiated. Applications will be closed for CFs that are not completed within the 48-month timeframe or that are not submitted to ASHA within 90 days after the 48-month timeframe. The Clinical Fellow will be required to reapply for certification and must meet the standards in effect at the time of re-application. CF experiences more than 5 years old at the time of application will not be accepted.
The CF must be completed under the mentorship of a clinician who held the CCC-SLP throughout the duration of the fellowship and must meet the qualifications described in Standard VII-B. It is the Clinical Fellow's responsibility to identify a CF mentor who meets ASHA's certification standards. Should the certification status of the mentoring SLP change during the CF experience, the Clinical Fellow will be awarded credit only for that portion of time during which the mentoring SLP held certification. It is incumbent upon the Clinical Fellow to verify the mentoring SLP's status periodically throughout the CF experience. Family members or individuals related in any way to the Clinical Fellow may not serve as mentoring SLPs to that Clinical Fellow.
Standard VII-A: Clinical Fellowship Experience
The CF must consist of clinical service activities that foster the continued growth and integration of knowledge, skills, and tasks of clinical practice in speech-language pathology consistent with ASHA's current *Scope of Practice in Speech-Language Pathology*. The CF must consist of no less than 36 weeks of full-time professional experience or its part-time equivalent.
Implementation: At least 80% of the Clinical Fellow's major responsibilities during the CF experience must be in direct, in-person client/patient contact (e.g., assessment, diagnosis, evaluation, screening,

treatment, clinical research activities, family/client consultations, recordkeeping, report writing, and/or counseling) related to the management process for individuals who exhibit communication and/or swallowing disabilities.

Full-time professional experience is defined as 35 hours per week, culminating in a minimum of 1,260 hours. Part-time experience should be at least 5 hours per week; anything less than that will not meet the CF requirement and may not be counted toward completion of the experience. Similarly, work in excess of 35 hours per week cannot be used to shorten the CF to less than 36 weeks.

Standard VII-B: Clinical Fellowship Mentorship

The Clinical Fellow must receive ongoing mentoring and formal evaluations by the CF mentor. Mentorship must be provided by a clinician who holds the CCC-SLP and who, after earning the CCC-SLP, has completed (1) a minimum of 9 months of full-time clinical experience, and (2) a minimum of 2 hours of professional development/continuing education in clinical instruction/supervision.

Implementation: Effective January 1, 2020, CF mentors for ASHA certification must complete 2 hours of professional development/continuing education in clinical instruction/supervision after being awarded the CCC-SLP and prior to mentoring the Clinical Fellow.

Direct observation must be in real time. A mentor must be available to consult with the Clinical Fellow who is providing clinical services. Direct observation of clinical practicum is intended to provide guidance and feedback and to facilitate the Clinical Fellow's independent use of essential clinical skills

Mentoring must include on-site, in-person observations and other monitoring activities, which may be executed by correspondence, review of video and/or audio recordings, evaluation of written reports, telephone conferences with the Clinical Fellow, or evaluations by professional colleagues with whom the Clinical Fellow works. The CF mentor and the Clinical Fellow must participate in regularly scheduled formal evaluations of the Clinical Fellow's progress during the CF experience. The Clinical Fellow must receive ongoing mentoring and formal evaluations by the CF mentor.

The amount of direct supervision provided by the CF mentor must be commensurate with the Clinical Fellow's knowledge, skills, and experience, and must not be less than the minimum required direct contact hours. Supervision must be sufficient to ensure the welfare of the individual(s) receiving services.

The mentoring SLP must engage in no fewer than 36 supervisory activities during the CF experience and must include 18 on-site observations of direct client contact at the Clinical Fellow's work site (1 hour = 1 on-site observation; a maximum of six on-site observations may be accrued in 1 day). At least six on-site observations must be conducted during each third of the CF experience. On-site observations must consist of the Clinical Fellow engaging in screening, evaluation, assessment, and/or habilitation/rehabilitation activities. Mentoring must include on-site, in-person observations; however, the use of real-time, interactive video and audio conferencing technology may be permitted as a form of observation, for which pre-approval must be obtained

Additionally, supervision must include 18 other monitoring activities. *Other monitoring activities* are defined as the evaluation of reports written by the Clinical Fellow, conferences between the CF mentor and the Clinical Fellow, discussions with professional colleagues of the Clinical Fellow, and so forth, and may be executed by correspondence, telephone, or reviewing of video and/or audio tapes. At least six other monitoring activities must be conducted during each third of the CF experience.

If the Clinical Fellow and their CF mentor want to use supervisory mechanisms other than those outlined above, they may submit a written request to the CFCC prior to initiating the CF. Written requests may be emailed to cfcc@asha.org or mailed to: CFCC, c/o ASHA Certification, 2200 Research Blvd. #313, Rockville, MD 20850. Requests must include the reason for the alternative supervision and a detailed description of the supervision that would be provided (i.e., type, length, frequency, etc.), and the request must be co-signed by both the Clinical Fellow and the CF mentor. On a case-by-case basis, the CFCC will review the circumstances and may or may not approve the supervisory process to be conducted in other ways. Additional information may be requested by the CFCC prior to approving any request.

Standard VII-C: Clinical Fellowship Outcomes

The Clinical Fellow must demonstrate knowledge and skills consistent with the ability to practice independently.

Implementation: At the completion of the CF experience, the applicant must have acquired and demonstrated the ability to:

- integrate and apply theoretical knowledge;
- evaluate their strengths and identify their limitations;

- refine clinical skills within the *Scope of Practice in Speech-Language Pathology*; and
- apply the ASHA *Code of Ethics* to independent professional practice.

In addition, upon completion of the CF, the applicant must demonstrate the ability to perform clinical activities accurately, consistently, and independently and to seek guidance as necessary.

The CF mentor must document and verify a Clinical Fellow's clinical skills using the *Clinical Fellowship Report and Rating Form*, which includes the *Clinical Fellowship Skills Inventory* (CFSI), as soon as the Clinical Fellow successfully completes the CF experience. This report must be signed by both the Clinical Fellow and CF mentor.

Standard VIII: Maintenance of Certification

Certificate holders must demonstrate continued professional development for maintenance of the CCC-SLP.

Implementation: Clinicians who hold the CCC-SLP must accumulate and report 30 Certification Maintenance Hours (CMHs) (or 3.0 ASHA continuing education units [CEUs]) of professional development, which must include a minimum of 1 CMH (or 0.1 ASHA CEU) in ethics during every 3-year certification maintenance interval beginning with the 2020–2022 maintenance interval.

Intervals are continuous and begin January 1 of the year following the initial awarding of certification or the reinstatement of certification. Random audits of compliance are conducted.

Accrual of professional development hours, adherence to the ASHA *Code of Ethics*, submission of certification maintenance compliance documentation, and payment of annual membership dues and/or certification fees are required for maintenance of certification.

If maintenance of certification is not accomplished within the 3-year interval, then certification will expire. Those who wish to regain certification must submit a reinstatement application and meet the standards in effect at the time the reinstatement application is submitted.

APPENDIX A

Florida Atlantic University
Regulation 5.010 Anti-Discrimination and Anti-Harassment Regulation

1. POLICY

(a) Florida Atlantic University is committed to ensuring that each member of the University community shall be permitted to work or study in an environment free from any form of unlawful discrimination or harassment that is based on race, color, religion, age, disability, sex, national origin, marital status, veteran status, sexual orientation, or any legally protected class or basis (each a "protected class"). The University recognizes its obligation to work towards a community in which diversity is valued and opportunity is equalized. This Regulation establishes procedures for a student, applicant, employee or a member of the University community to file a complaint of alleged discrimination or harassment.

(b) It shall be a violation of this Regulation for any officer, employee, agent, or student to discriminate against or harass, as defined in this Regulation, any other officer, employee, agent, student, or applicant. Discrimination and harassment are forms of conduct that shall result in disciplinary or other action as provided by the Regulations and Policies of the University.

(c) Activities covered under this Regulation include, but are not limited to, all educational, athletic, cultural and social activities occurring on a campus of or sponsored by Florida Atlantic University, housing supplied by the University, and employment practices between the University and its employees, including Support Personnel ("SP") employees.

(d) The Office of Equal Opportunity Programs ("EOP") shall administer the policies and procedures outlined in this Regulation. EOP shall answer inquiries regarding the procedures contained in this Regulation and may provide informal advice regarding issues of discrimination.

(e) Retaliation, or otherwise taking adverse employment or educational action, against a member of the University community because he/she in good faith reported discrimination or harassment, or participated in an investigation or review regarding a complaint, is strictly prohibited. Those found to have violated this prohibition against retaliation will be subject to disciplinary action up to and including termination.

(f) Any University supervisory employee who receives a report, observes or learns of an alleged violation of this Regulation has an absolute and unqualified duty to immediately report the conduct to the EOP Director. Those found to have failed to report in a timely manner will be subject to disciplinary action up to and including termination.

(g) Every University employee has a duty to cooperate fully and unconditionally in a harassment investigation. This duty includes, among other things, speaking with the EOP investigator and voluntarily providing all documentation which relate to the claim being investigated. The failure and/or refusal of any employee to cooperate in an investigation may result in disciplinary action up to and including termination.

(h) The prohibited conduct contained in this Regulation shall apply to vendors and contractors of the University. The EOP Director shall consult with the vendor or contract manager to determine how any investigation will be undertaken. The University shall take action against the vendor or contractor, when warranted, in accordance with the terms of the governing contract or agreement.

2. DEFINITIONS/EXAMPLES

(a) For the purpose of this Regulation, discrimination is defined as unlawfully treating any member of the University community differently than similarly situated others based on a protected class herein. Harassment is a form of unlawful discrimination based on a protected class that may also be covered under Title VII of the Civil Rights Act of 1964, the Florida Civil Rights Act and other laws.

(b) Additionally, discrimination on the basis of sex in education programs and activities receiving federal financial funding as set forth in Title IX of the Education Amendments of 1972, as amended ("Title IX"), is included in this Regulation's definition of prohibited discrimination.

(c) For the purposes of this Regulation, examples of conduct that fall into the definition of discrimination include, but are not limited to:
1. Disparity of treatment in recruitment, hiring, training, promotion, transfer, reassignment, termination, salary and other economic benefits, and all other terms and conditions of employment on the basis of membership in a protected class herein.
2. Disparity of treatment in educational programs and related support services on the basis of membership in a protected class herein.
3. Limitation in access to housing, or of participation in athletic, social, cultural or other activities of the University because of membership in a protected class herein, and not based on a bona fide requirement or distinction. -3 -
4. Retaliation for asserting protected anti-discrimination rights, filing complaints or protesting practices which are prohibited under this Regulation.

(d) For the purposes of this Regulation, examples of conduct that fall into the definition of harassment include, but are not limited to:
1. Verbal and/or physical conduct based on a protected characteristic that: (A) has the purpose or effect of creating an objectively intimidating, hostile or offensive work or educational environment; (B) has the purpose or effect of unreasonably interfering with an individual's work or learning performance; or (C) otherwise unreasonably adversely affects an individual's employment or educational opportunities.
2. Examples of the foregoing verbal and/or physical conduct that may constitute harassment could include making "jokes" based on a protected characteristic, objectionable epithets/slurs, threatened or actual physical harm or abuse, the display of hostile symbols/objects, and other intimidating or insulting conduct directed against the individual because of their protected characteristic or membership.

(e) Sexual harassment, which includes acts of sexual violence and may include gender-based harassment, is a form of discrimination on the basis of sex and is prohibited by Title IX.
1. Sexual harassment is unwelcome conduct of a sexual nature. It includes unwelcome sexual advances, requests for sexual favors, and other verbal, nonverbal, or physical conduct of a sexual nature when:
   a. Submission to such conduct or request is made either explicitly or implicitly a term or condition of an individual's employment;
   b. Submission to such conduct or request is made either explicitly or implicitly a term or condition of academic achievement;
   c. Submission to or rejection of such conduct or request by an individual is used as the basis for an employment or academic decision affecting such individual; or
   d. Such conduct or request unreasonably interferes with an individual's work or academic performance or creates an objectively intimidating, hostile, or offensive environment for working or learning.

2. Examples of unwelcome conduct of a sexual nature that may constitute sexual harassment under this regulation include, but are not limited to: -4 -
   a. Displaying or telling sexually oriented jokes, statements, photographs, drawings, computer images, web sites, videos, slides, graphics, calendars, cartoons, e-mails or other communications.
   b. Making sexually explicit or suggestive gestures or sounds.
   c. Making actual or implied promises of an employment or educational opportunity or benefit in exchange for sexual activity.
   d. Making actual or implied threats to impede or interfere with employment or educational opportunities or benefits for failing to agree to or engage in sexual activity.
   e. Inappropriate and unwelcome sexual attention or touching, including but not limited to leering, patting, fondling, pinching, sexually-based stalking and/or bullying, and attempted or actual kissing.
   f. Requesting or coercing sexual intercourse or sexual favors, or attempting to or actually engaging in a sexual assault.
   g. Continuing to ask someone for a date after repeatedly being told "no."
   h. Continuing any of the conduct listed in the above examples after being told or being otherwise made aware that the conduct is unwelcome.

3. Sexual Violence is a form of sexual harassment and is prohibited under Title IX. Sexual violence includes physical sexual acts perpetrated against a person's will or where a person is incapable of giving consent due to an intellectual or other disability or the victim's use of or exposure to drugs or alcohol. Acts falling into the category of sexual violence include, but are not limited to, rape, sexual assault,

sexual battery, and sexual coercion.
4. Gender-based harassment may be a form of sexual harassment prohibited under Title IX. Gender-based harassment includes acts of verbal, nonverbal or physical aggression, intimidation, or hostility based on sex or sex-stereotyping, even if those acts do not involve conduct of a sexual nature.

(f) The definition of sexual harassment excludes the use of sexual material in a classroom setting for academic purposes.

(g) When referred to in this Regulation, "days" means calendar days unless otherwise noted.

(h) Disparate treatment on the basis of a class not protected by federal or state law shall not constitute discrimination or harassment if such disparate treatment is required by federal or state law.

3. PROCEDURE FOR REPORTING VIOLATIONS
(a) The Office of Equal Opportunity Programs is responsible for administering the complaint and investigation process set forth in this Regulation. In cases where the potential complainant chooses not to file a formal complaint, EOP will take action to inform the alleged offender of the concerns, suggesting that the individual monitor and modify (if necessary) his/her behavior. All complaints, formal or informal, must be reported to EOP. The EOP contact information is provided below:

Director Equal Opportunity
Programs Florida Atlantic University
Administration Building
777 Glades Road, Room 265
Boca Raton, Florida 33431-0991
http://www.fau.edu/eop/
(561) 297-3004
The EOP Director is the Title IX Coordinator for the University.

(b) Any University employee who believes he/she has been harassed or discriminated against in violation of this Regulation must report the facts and circumstances thereof to the EOP Director, the University Provost, the Director of Human Resources, or to his/her College Dean or Vice President, who in turn must notify the EOP Director.

(c) Any student who believes he/she has been harassed or discriminated against in violation of this Regulation must report the facts and circumstances thereof to the EOP Director, the University Ombudsman, the University Provost, the Dean of Students, or to his/her Department Head/Director or College Dean, who in turn must notify the EOP Director.

(d) Reports or allegations of an alleged violation of this Regulation will be processed upon the filing of a written complaint with EOP. The Director of EOP may process an alleged violation without a written complaint if deemed necessary by the Director and enough information is available to conduct a responsible investigation.

(e) A complaint must be filed with EOP within one-hundred eighty (180) days of the alleged act(s) of discrimination/harassment. The Director of EOP may process an alleged violation outside of this time limitation if deemed necessary by the Director. The filing of a complaint under this Regulation is independent and does not preclude the complainant from also filing a complaint with federal, state or local enforcement agencies. The filing of a complaint with EOP does not constitute a filing with, or have any effect on the filing time limitations of those external agencies. All complainants are urged to contact these external agencies directly to learn the filing deadlines and procedures for each agency. Contact information for these agencies is available from the EOP office. -6 -

(f) All complaints shall contain the name of the complainant and state the nature of the act(s) complained of, including such details as the name of the alleged offender and the date(s) or approximate date(s) on which the offending act(s) occurred, the name(s) of any witnesses, and the desired resolution(s). Any portion of a complaint file that is exempt from public disclosure under the Florida Public Records law shall remain confidential to the extent permitted by law.

4. PROCEDURE FOR INVESTIGATION OF COMPLAINTS

(a) EOP shall investigate all complaints that contain enough information to allege prohibited discrimination or harassment. This investigation must include, but shall not be limited to, interviewing the alleged offender and the complainant. Each party shall have an equal opportunity to present relevant witnesses and other evidence. The investigation may include the interview of other persons who may have information relevant to the allegations, preparation of witness statements for all persons interviewed, and review of any relevant documents. Upon completion of the investigation, a final report shall be prepared which includes a summary of the complaint, a description of the investigation, whether a violation of University Regulation was found, based on a preponderance of the evidence, and recommendations for disposition.

(b) The Office of Equal Opportunity Programs may attempt conciliation before or during the course of an investigation of a complaint. If conciliation is not achieved, then EOP shall continue to investigate the complaint, and shall issue a final report.

(c) EOP shall conclude its investigation and issue its final report within seventy-five (75) days of the filing of the complaint. If additional time is required, the complainant and alleged offender will be notified in writing no less than ten (10) days prior to the seventy-five (75) day deadline of the reason(s) for the delay and the expected date of completion.

(d) The final report by EOP shall be submitted to the appropriate Vice President or Associate Provost if an employee is involved, and/or to the Dean of Students if a student is involved. The alleged offender and complainant will each be notified in writing of the outcome of the complaint and any appeal. Corrective or disciplinary action up to and including dismissal or expulsion will be considered and implemented, if warranted, by the Vice President, Provost or Dean of Students in consultation with the EOP Director. Corrective or disciplinary action will also be considered and implemented if EOP determined the complaint was unfounded and made maliciously or recklessly. All disciplinary action shall be subject to applicable University Regulations (including but not limited to University Regulation 5.009 (Grievance Procedure) and University Regulation 4.007 (Student Code of Conduct)), policies and applicable collective bargaining agreements. -7 -

5. PROCEDURE FOR RECONSIDERATION
(a) Any party may submit a written response or statement to be attached to the EOP final report and maintained in the same file.

(b) Either the complainant or alleged offender may request reconsideration of the finding in the EOP final report. The party must submit this request in writing to the EOP Director within ten (10) days of receipt of the EOP final report.

(c) The request for reconsideration must be in writing and shall specify the basis of the request. Typically, reconsideration will be granted only in cases where relevant evidence was not reviewed and/or new evidence is available.

Specific Authority: Article IX of the Florida Constitution; Florida Board of Governors Regulation 1.001; Formerly 6C5-5.012, Amended 11-11-87, 7-5-99, 11-9-05, 6-28-06, 11-16-11.