If you follow all the steps in this guide, you will successfully register for the BCAT exam. For additional assistance please contact BICC® between 8 AM and 5 PM CST at 618-639-BCAT or e-mail leadership@behavioralcertification.org.

### Checklist for BCAT Registration

You can check off individual tasks as you go through the instructions. The major steps are detailed below:

| ☐ | Step 1 | Create Account at BICC® Website |
| ☐ | Step 2 | Complete Your Registration Profile |
| ☐ | Step 3 | Purchase BCAT Exam |
| ☐ | Step 4 | Electronically Sign your Eligibility Documents |
| ☐ | Step 5 | Request your Transcript |

**A note about transcripts:** The BICC® requires primary source verification which means your educational institution must send your transcript directly to the BICC®. You are not allowed to send the transcript to the BICC®. Your employer cannot send a copy of your transcript to the BICC®. The minimum educational requirement is a high school diploma or equivalent. Most high schools will send an electronic copy of your transcript free of charge to BICC® via transcripts@behavioralcertification.org. When you make a request of your high school or college to send a copy of your transcript, it can be sent electronically or to our office. Electronic requests should be sent to transcripts@behavioralcertification.org. Paper copies should be sent to:

BICC® Candidate Documents  
300 Commerce Blvd, Suite F  
Jerseyville, IL 62052

| ☐ | Step 6 | **After you receive email from PSI, Schedule BCAT Exam** |

**A note about scheduling your exam with PSI:** If you do not receive an email from PSI with instructions to schedule your BCAT exam within 2 business days of completing Step 3: Purchase BCAT Exam, please call the BICC® offices for further assistance. We can be reached 8 AM – 5 PM CST, weekdays, at (618) 639-2228 or email us at leadership@behavioralcertification.org. Sometimes email notifications get sent to your SPAM folder.
Step 1: Account Set Up and Login

A  Go to www.behavioralcertification.org

Click on the Let’s Get Start Now in the middle of the home page

B  Click Create a Login

C  Answer the questions in the pop-up window

BICC® accounts must be created by the applicant pursuing certification.

D  Answer the questions in the pop-up window

Do not create a new account if you may have created an account before.
You will need to provide the following information to create an account:

**Create a Login**

Name as it appears on your government issued ID

First    Middle    Last

Email*
Email

Password*
Password

Confirm password*
Confirm Password

Date of Birth*
Month ▼  Day ▼  Year ▼

Submit

You must provide your First Name, Middle Name, Last Name, Email (BICC® recommends using a personal email account rather than a work account), Password, Confirm Password, and Date of Birth (Candidate’s must be at least 18 years or older)

**Create a Login**

Name as it appears on your government issued ID

Luke    Truman    Lamb

Email*
lukeflamb@gmail.com

Password*
************

Confirm password*
************

Date of Birth*
Decemb ▼  13 ▼  1996 ▼

Submit

After you click Submit, you should receive notification that you were successful

**Success**

Account created successfully.

Click OK, you will need to login again
Login to your account

You will then be asked to select security questions and provide answers to allow you to retrieve your password in the future.

Provide an answer

You have successfully created your account. Go to Step 2.
Step 2: Complete Your Registration Profile

You will then be directed to the Registration Profile including Personal Details, Professional Details, and Supervisor and Credential Manager Details

A

Under Personal Details, complete all required Personal Details including:
- Personal Phone
- Personal Address, City, State, Country and Zip/Postal Code
- Any optional information to your preferences

B

Complete Professional Details:
- Work Email is optional
- Current Employer is required

C

For example:
Complete Supervisor and Credential Manager Details:

- You must provide email information for a Supervisor who will verify that you completed 40 hours of instruction across all areas of the BCAT Exam Content Outline and 15 hours of supervised experience working with an individual(s) with autism.
- Select appropriate options including uploading a certificate of completion for 40 hours of training or indicating the same supervisor will verify both your training and experience.
- Carefully review the Credentialing Manager consent and enter Credential Manager email if you agree to the conditions.

If you would like to request an ADA Accommodation, please endorse the box and you will receive the required documentation via email.

Accommodations must be pre-approved by the BICC® and arranged with PSI. Please submit all required paperwork at least 3 weeks before a requested test date to ensure your accommodations can be provided.

Please review all terms and conditions, check box to agree, and click Continue to Pay Exam Fees.
Click OK to be directed to purchase your exam fees

You have successfully completed your registration profile. Continue to Step 3
### Step 3: Purchase BCAT Exam

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong></td>
<td>If you are not automatically directed to the Billing Information page, you may click the Application/Renewal Fees button</td>
</tr>
<tr>
<td></td>
<td><img src="image" alt="Application/Renewal Fees" /></td>
</tr>
<tr>
<td><strong>B</strong></td>
<td>The Billing Information page will load.</td>
</tr>
<tr>
<td></td>
<td><img src="image" alt="Billing Information" /></td>
</tr>
<tr>
<td><strong>C</strong></td>
<td>BCAT fees can be paid using a <strong>credit card</strong> or <strong>Coupon Code</strong>. Some providers purchase coupon codes from the BICC® to distribute to their employees. Please check with your employer to see if they would like you to use a Coupon Code to purchase your exam fee. If paying by credit card please follow steps C – E. If paying using coupon codes, please skip C – E and follow steps F -</td>
</tr>
<tr>
<td></td>
<td><img src="image" alt="Credit Card and Coupon Code" /></td>
</tr>
<tr>
<td><strong>D</strong></td>
<td>If you are paying using a <strong>Coupon Code</strong>, Skip to Step F. If you are purchasing the BCAT using a credit card, please check the boxes for the Exam Fee with Application Verification, and the Criminal Background Check</td>
</tr>
<tr>
<td></td>
<td><img src="image" alt="Exam Fee Verification and Criminal Background Check" /></td>
</tr>
<tr>
<td><strong>E</strong></td>
<td>Your total should indicate $124. Click the Pay button</td>
</tr>
<tr>
<td></td>
<td><img src="image" alt="Total Amount" /></td>
</tr>
</tbody>
</table>
Upon clicking Pay, you will be directed to the BICC® Payment Center where you can input your personal and credit card information. The Email you include will receive a receipt for your purchase.

If paying with Coupon Code, copy and paste the coupon code you received from your employer into the box for the Exam Fee with Application Verification and click Apply Coupon Code.

Once you see the Success pop up screen, you have successfully completed your purchase. This also initiates your Adobe EchoSign packet of eligibility documents. Next, you should receive an email with instructions to complete the paperless eligibility documents.

You have successfully created your account, completed your registration and purchased your exam fee.
### Step 4: Electronically Signing your Eligibility Documents

<table>
<thead>
<tr>
<th>A</th>
<th>Within hours of purchasing your exam fees, you will receive an email from BICC® with the Subject line: “Please sign Agreement Step 1” containing an Adobe Sign document</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>The hyperlink “Click here to review and sign Agreement Step 1” will direct you to an 11 page document where you can provide information and electronically sign 4 documents beginning with a BICC® Code of Ethics</td>
</tr>
</tbody>
</table>

#### Adobe Sign

#### BICC Has Sent You Agreement Step 1 to Sign

- **Click here to review and sign Agreement Step 1.**
- After you sign Agreement Step 1, all parties will receive a final PDF copy by email.
- If you need to delegate this document to an authorized party for signature, please do not forward this email. Instead, click here to delegate.

#### BICC Code of Ethics

- Board Certified Autism Technician
- Code of Ethics

**Statement:**

The BICC Code of Ethics applies to all individuals certificated by BICC, as well as individuals seeking certification (candidates) or applicants for BICC. All applicants, candidates, and certificate holders agree to be bound by the Code of Ethics. Failure to comply with the Code of Ethics may result in disciplinary action. The Code of Ethics is designed to provide high standards for the professional behavior of BICC certificated professionals. This Code is intended to promote high professional standards through the promotion of ethics and professionalism among all professionals.

#### BICC Code of Ethics

- **Statement:**
- The Code of Ethics applies to all individuals certificated by BICC, as well as individuals seeking certification (candidates) or applicants for BICC. All applicants, candidates, and certificate holders agree to be bound by the Code of Ethics. Failure to comply with the Code of Ethics may result in disciplinary action. The Code of Ethics is designed to provide high standards for the professional behavior of BICC certificated professionals. This Code is intended to promote high professional standards through the promotion of ethics and professionalism among all professionals.

#### Carefully read the Code of Ethics
At the bottom of the page are 2 options

If you agree to the code, please click each box to endorse them

Then click Applicants Signature to be directed to a pop-up window that allows you to electronically sign your name by typing, drawing, capturing an image, or using a mobile device with a touch screen

If you select mobile device, the phone number you enter will receive a text message with a link to allow you to sign using your device’s touch screen. You will also need to type in your name if you choose this option.

You will only be prompted to provide a signature 1 time. All other required signatures will be generated based on the one you provide.

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Next provide information required to complete your criminal background check and agree to the disclosure and authorization, including:

- Applicant Signature
- Social Security Number (type 1 digit into each box)
- Job State
- Driver’s License Number (if you have one) and DL State
- Gender
- Suffix is optional
- Driver’s License is optional
- Driver’s License State is optional
- Other Names Used is optional

Available to expunge any information as my title to use, and if the title contains any information that is noted, such will be explained to me.

Washington applicants or employees: I understand that if the report is provided to an employer in the State of Washington, the employer has the right to contact the following office for more information regarding my rights under Washington state law in regard to these reports: Office of Washington Attorney General, Consumer Protection Division, 800 5th Ave. Ste. 200, Seattle, Washington 98104-3130, (206) 461-7744.

Company/Employee: [Name]

Applicant Name: [Name]

Applicant Signature: [Signature]

Date: Jan 16, 2018

TO BE COMPLETED BY APPLICANT:

The following information is true and correct to the best of my knowledge and will be used for background screening purposes only. Please use an ink pen and print clearly, use “X” for each choice, one letter per block.

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal First Name</td>
<td>[Value]</td>
</tr>
<tr>
<td>Legal Last Name</td>
<td>[Value]</td>
</tr>
<tr>
<td>Legal Suffix</td>
<td>[Value]</td>
</tr>
<tr>
<td>Social Security No.</td>
<td>[Value]</td>
</tr>
<tr>
<td>Date of Birth (mm/dd/yyyy)</td>
<td>[Value]</td>
</tr>
<tr>
<td>Current Address</td>
<td>[Value]</td>
</tr>
<tr>
<td>City</td>
<td>[Value]</td>
</tr>
<tr>
<td>State</td>
<td>[Value]</td>
</tr>
<tr>
<td>Zip</td>
<td>[Value]</td>
</tr>
<tr>
<td>Main Contact Phone</td>
<td>[Value]</td>
</tr>
<tr>
<td>Driver's License No.</td>
<td>[Value]</td>
</tr>
<tr>
<td>Other Names Used (indicate if used while in school)</td>
<td>[Value]</td>
</tr>
</tbody>
</table>

Verify all required information is accurate. Providing inaccurate information may result in additional fees.
Next, provide information for the Documentation of Relevant Experience which must total at least 15 hours of experience in at least one of the available Setting options.

<table>
<thead>
<tr>
<th>Setting</th>
<th>Duration of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client home</td>
<td>0</td>
</tr>
<tr>
<td>School</td>
<td>0</td>
</tr>
<tr>
<td>Community</td>
<td>0</td>
</tr>
<tr>
<td>Daycare</td>
<td>0</td>
</tr>
<tr>
<td>Center based</td>
<td>0</td>
</tr>
</tbody>
</table>

**Total Hours of Experience:** 0.00

*Minimum required hours of experience are 15 total. Failure to document at least 15 hours of experience may result in additional fees to submit a corrected application.*

For example, if you spent 3 hours 15 minutes in the client’s home, 1 hour 30 minutes in the community, and 10 hours 45 minutes in center based therapy, your form should look like this:

<table>
<thead>
<tr>
<th>Setting</th>
<th>Duration of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client home</td>
<td>3</td>
</tr>
<tr>
<td>School</td>
<td>1</td>
</tr>
<tr>
<td>Community</td>
<td>0</td>
</tr>
<tr>
<td>Daycare</td>
<td>0</td>
</tr>
<tr>
<td>Center based</td>
<td>10</td>
</tr>
</tbody>
</table>

**Total Hours of Experience:** 15.00

*Minimum required hours of experience are 15 total. Failure to document at least 15 hours of experience may result in additional fees to submit a corrected application.*

Once you have provided the Setting in which you completed at least 15 hours of supervised experience, you must the boxes for the options and electronically sign.

- I would like the supervisor listed in my BICC portal to receive an email asking them to verify and electronically sign the information I have provided above regarding my 15 hours of relevant experience.

- I certify that the information provided herein, including but not limited to relevant experience, is true and correct to the best of my knowledge.

**Applicants Signature:** [Click here to sign]  
**Date:** Jan 16, 2018

For example:

- I would like the supervisor listed in my BICC portal to receive an email asking them to verify and electronically sign the information I have provided above regarding my 15 hours of relevant experience.

- I certify that the information provided herein, including but not limited to relevant experience, is true and correct to the best of my knowledge.

**Applicants Signature:** Linda Cook  
**Date:** Jan 16, 2018
Finally, provide the breakdown of the 40 hours of training you received across the BCAT Task List.

<table>
<thead>
<tr>
<th>Content Areas of the BCAT Task List</th>
<th>Duration of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism Spectrum Disorder</td>
<td>3</td>
</tr>
<tr>
<td>Principles of Applied Behavior Analysis</td>
<td>14</td>
</tr>
<tr>
<td>Skill Acquisition</td>
<td>9</td>
</tr>
<tr>
<td>Reduction of Problem Behavior</td>
<td>7</td>
</tr>
<tr>
<td>Data Collection</td>
<td>2</td>
</tr>
<tr>
<td>Ethical and Legal Considerations</td>
<td>4</td>
</tr>
</tbody>
</table>

**Total Hours of Training**

Minimum required hours of training are 40 total.

Failure to document at least 40 hours of experience may result in additional fees to submit a corrected application.

Failure to provide 40 hours of documented training may result in additional fees incurred for processing updated paperwork. Please ask your employer or supervisor for a breakdown of the instruction you received. In the following example, the candidate received 3 hours and 10 minutes of instruction in Autism Spectrum Disorder, 14 hours and 45 minutes of instruction in Principles of Applied Behavior Analysis, 9 hours and 20 minutes of instruction in Skill Acquisition, 7 hours 5 minutes of instruction in Reduction of problem behavior, 2 hours 20 minutes of instruction in Data Collection, and 4 hours 30 minutes of instruction in ethical and legal considerations:

<table>
<thead>
<tr>
<th>Content Areas of the BCAT Task List</th>
<th>Duration of Training</th>
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</thead>
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<td>Autism Spectrum Disorder</td>
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<td>7</td>
</tr>
<tr>
<td>Data Collection</td>
<td>2</td>
</tr>
<tr>
<td>Ethical and Legal Considerations</td>
<td>4</td>
</tr>
</tbody>
</table>

**Total Hours of Training**

Minimum required hours of training are 40 total.

Failure to document at least 40 hours of experience may result in additional fees to submit a corrected application.

After providing at least 40 hours of training, read and check the boxes and electronically sign the document.

Applications Signature: [Signature]

Date: [Date]
The final step of electronically signing your eligibility documents is clicking the Click to Sign button at the bottom of the screen.

You will know that you successfully completed filling out and signing your documents when you reach this screen:

You will receive an email with a copy of the signed document as a PDF that you can download and save for your records.

You have successfully completed your eligibility documents. They will be automatically uploaded to your BICC® account and reviewed by BICC® staff. Your supervisor(s) will now be sent their email to electronically sign your Documentation of Relevant Training and Documentation of Relevant Experience

Step 5: Requesting Your Transcript

The BICC® requires primary source verification. Your educational institution must send your transcript directly to the BICC®. You cannot send a copy. Your employer cannot send a copy.

The minimum educational requirement for the BCAT is a high school diploma or equivalent. Please contact your high school or university and request that they send a copy of your transcript to the BICC®. Transcripts can be sent electronically via transcripts@behavioralcertification.org or to our office at:

BICC® Candidate Documents
300 Commerce Blvd, Suite F
Jerseyville, IL 62052

You will receive an email notifying you when the BICC® receives and verifies your transcript.
**Step 6: Scheduling Your BCAT Exam**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
</table>
| **A** | Within 1 – 2 business days of purchasing your exam fees, you should receive an email from AMP Customer Service <schedule@goamp.com>  
   If you do not receive that email after 2 business day, please call the BICC® bewteen 8 AM - 5 PM CST weekday at 618-639-BCAT or email leadership@behavioralcertification.org |
| **B** | Your PSI Email will have the subject: Board Certified Autism Technician Examination Scheduling Instructions for Candidate Name and will contain the following information:  
   Your Assigned ID#: AB####  
   We have received your approval to take the Board Certified Autism Technician Examination. You may schedule your examination appointment by one of the following methods:  
   **1. Schedule Online:** Go to [www.goAMP.com](http://www.goAMP.com) and select “Candidates,” then follow the simple, step-by-step instructions to choose your exam and register using your Assigned ID# above.  
   **OR**  
   **2. Telephone Scheduling:** Call Candidate Services at (888) 519-9901. This toll-free number is answered from 7:00 AM to 9:00 PM (Central Time) Monday through Thursday, 7:00 AM to 7:00 PM on Friday, and 8:30 AM to 5:00 PM on Saturday. Appointments are made on a first-come, first-served basis.  
   If you have any questions concerning scheduling, please contact Candidate Services at (888) 519-9901.  
   Best wishes for success on the Board Certified Autism Technician Examination! |
| **C** | Based on your preference, you can go to [www.goAMP.com](http://www.goAMP.com) or call the number above to schedule the BCAT Exam at a convenient location of your choosing.  
   Know the guidelines for scheduling exams found in your BICC® account under BICC® ID/Exam Registration Instructions. Missing your scheduled exam may result in a $74 Exam Retake Fee to reschedule your exam. |

Best wishes on your BCAT exam. Please contact the BICC® if we can provide any additional assistance. We can be reached at 618-639-2228 or leadership@behavioralcertification.org.