



RBT® Request to Return from Voluntary Inactive Status Application

Overview

This application is for RBTs to request to return from voluntary inactive status. When an RBT returns from voluntary inactive status, their renewal cycle restarts from where it was paused. For example, if they become inactive 3 months into their cycle, they have 9 months before they must renew again (and meet the renewal requirements). If an RBT does **not** submit this application and receive approval within 2 years of the date their voluntary inactive status began, their certification will expire, and they must reapply under the requirements in effect at the time they submit their application to become recertified. Please note that individuals who reside outside of the US, Canada, Australia, and the United Kingdom will not be eligible for certification after January 1, 2023 if they do not return within 2 years.

Instructions

RBTs who have been on voluntary inactive status for less than 2 years and wish to return must do the following:

1. Complete an [RBT Renewal Competency Assessment](#) no more than 45 days before you plan to apply. This assessment must be completed no more than 45 days before your payment date.
2. Complete this application and submit it with the RBT Renewal Competency Assessment through the [Contact Us Form](#) within 2 years of the date your voluntary inactive status began.
3. Once your application has been received, you will be notified via email and given instructions on how to pay the \$25 nonrefundable processing fee. You will have two weeks from when you receive that email to submit payment.
4. Once your payment has been received, please allow up to 2 weeks for processing. You can see current processing times by visiting the [Customer Service Updates](#) web page. This application will expire two weeks from when the invoice is added to your BACB account, so please monitor your email on file with the BACB for confirmation of approval or feedback on required next steps.

Your certification will be reactivated on the day your application and payment are approved. Once reactivated, you must have an RBT Supervisor or RBT Requirements Coordinator on record with the BACB.

A. RBT Information

RBT's Full Legal Name: _____

BACB ID # (located in your [BACB account](#)): _____

Date Voluntary Inactive Status Began: _____

If you are unsure of your inactivation date, [contact the BACB](#).

B. Supervision

- By signing below, I affirm that I (RBT) will resume receiving supervision for 5% of my hours spent providing behavior-analytic services.

C. Required Reporting

I (RBT) understand that:

- By signing below, I affirm that I am required to report to my RBT Supervisor or RBT Requirements Coordinator on record, if applicable, any information that might impact my background check or status with the BACB.
- By signing below, I affirm that I am required to report to my RBT Supervisor or RBT Requirements Coordinator on record and/or the BACB any physical or mental health condition or substance use disorder that could (a) impair my ability to competently provide behavior-analytic services and/or (b) jeopardize public health and safety.
- By signing below, I affirm that I am required to report to my RBT Supervisor or RBT Requirements Coordinator on record and/or the BACB any disciplinary investigation or action naming me conducted by a professional or regulatory body.
- By signing below, I affirm that I am required to report to my RBT Supervisor or RBT Requirements Coordinator on record and/or the BACB any public health or safety-related investigation or action naming me.

D. Attestation

By signing, I (RBT) acknowledge and affirm that:

- By signing below, I affirm that I have carefully read and understand the BACB's rules and requirements, including the [Terms of Use](#).
- By signing below, I affirm that I agree to abide by the BACB's rules and requirements, including the [Terms of Use](#).
- By signing below, I affirm that the information I have provided in this application is true and correct to the best of my knowledge.

If you need to report any information or noncompliance with BACB requirements, you may do so via the [Reporting to the Ethics Department](#) web page. Please note that this may delay the processing of your application.

RBT'S FULL NAME: _____

RBT'S SIGNATURE: _____ DATE: _____

This document must be signed in accordance with the [Acceptable Signatures Policy](#) within 180 days of the application submission date.