

Kentucky Board of Speech Language Pathology and Audiology
PO Box 1360
Frankfort, KY 40602
<http://slp.ky.gov>
slpa@ky.gov

Frequently Asked Questions for Renewal

Please review this document in its entirety as majority of common questions are answered below.

When do I need to renew my license?

- All licenses should be renewed by January 31, 2024. Licenses renewed between Feb 1, 2024 and March 2, 2024 will be subject to a late fee.

What CE can I use for this renewal?

- All continuing education for this renewal must have been earned Feb 1, 2022- January 31, 2024. There are no exceptions.

What If I am planning to retire?

- If you have retired and do not wish to renew your license, first off Congratulations! You may choose to renew your license as “INACTIVE” status or just let it expire. Neither of these will put you in “bad standing” with the Board.

What If I have moved out of state or I will be moving?

- You may choose to renew your licenses as “INACTIVE” status or choose to let it expire. If you have the possibility of moving back within the next renewal period “INACTIVE” is suggested.

I have renewed as INACTIVE before and the system will not let me this time?

- Per [201 KAR 17:090](#) A licensee on “INACTIVE” status shall submit proof of thirty (30) hours of continuing education if applying for third consecutive biennial renewal under inactive status

AUDIT REQUIREMENTS

The Board audits 10% of its renewals annually. Audits are chosen at random via the licensing system. You will be notified via your renewal email if you were chosen for audit.

What will I need to submit if I am audited?

- You will still enter your CE as normal into the eService portal but you will also be required to upload proof of completion certificates of each course. You may also upload a copy of your ASHA transcript as long as the entry is detailed with course name and amount of hours earned. **Sign in sheets, copies of agendas and general programs are NOT ACCEPTED.**

What if I don't have a certificate of attendance?

- You will need to contact the sponsoring association or agency. The Board or its Administrator cannot assist with obtaining this information.

Can you clarify what qualifies as board approved continuing education?

- Courses preapproved by ASHA or AAA are automatically accepted by the Board which includes most courses on speechpathology.com and audiologyonline.com. Other approved courses are listed on the Boards website under "Continuing Education" by year they were submitted for approval.

Once submitted a Board member will need to review your submission

eService QUESTIONS

If you need your USERNAME or PASSWORD, please email slpa@ky.gov with USERNAME/PASSSSWORD in the subject line. If you no longer have access to the email used for your account, please contact our office.

- Our office recommends submitting **your renewal at least 2 weeks in advance of the January 31 deadline.**
- **Our Board Administrator is available to assist with any questions.** Please be aware our Board Administrator may not be able to answer every phone call. You may leave a voice message. **Email is best for any questions** if you are able to do so. Responses to voice and email messages will occur in the order in which they are received, within

approximately 1-3 business days during the renewal period. Thank you for your understanding during this busy time!

- **It may be difficult to submit your online renewal using an iPad, iPhone, or other Apple device.** We recommend using a different mobile device or a desktop computer if encountering any issues.

- **Renewals must be submitted via your online eServices account.**
 - **Direct link:** <https://oop.ky.gov/DPLServices/Login.aspx> **OR**
 - **Go to** <http://slp.ky.gov>
 - **Click on “eService”**
 - Most licensees have already set up a **username and password** from last year’s renewal. If you cannot remember your username or password (case sensitive), or need your unique identifying “OP ID” number, please send an email to slpa@ky.gov

[contact information.](#)

[Licensing](#) [Legal](#) [Continuing Education](#) [Forms and Documents](#)

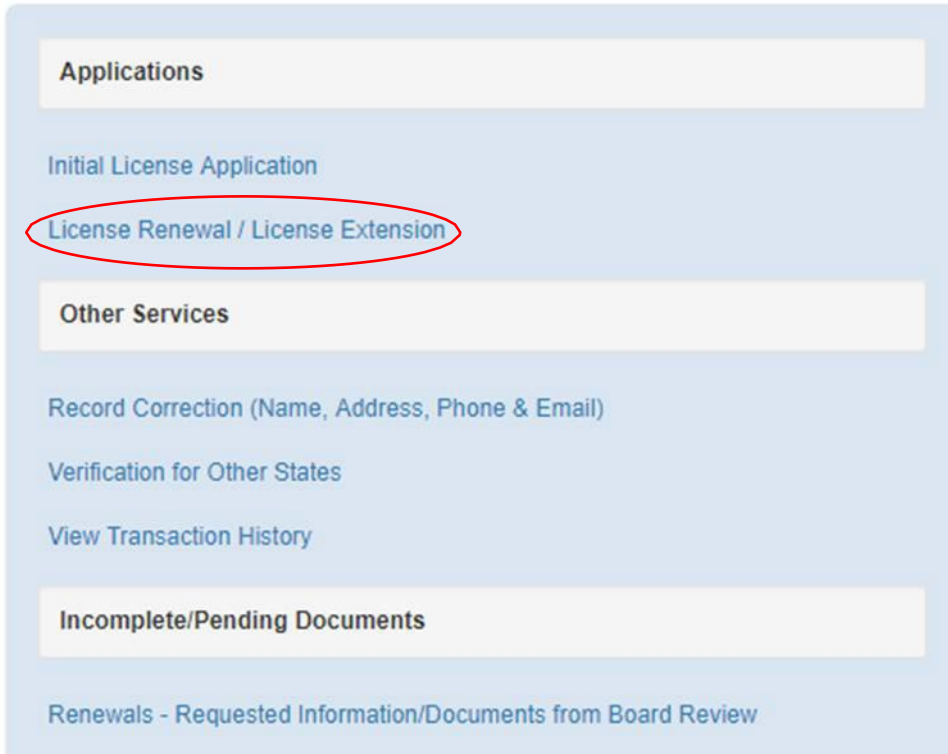
[eServices](#)

[VOIP](#)

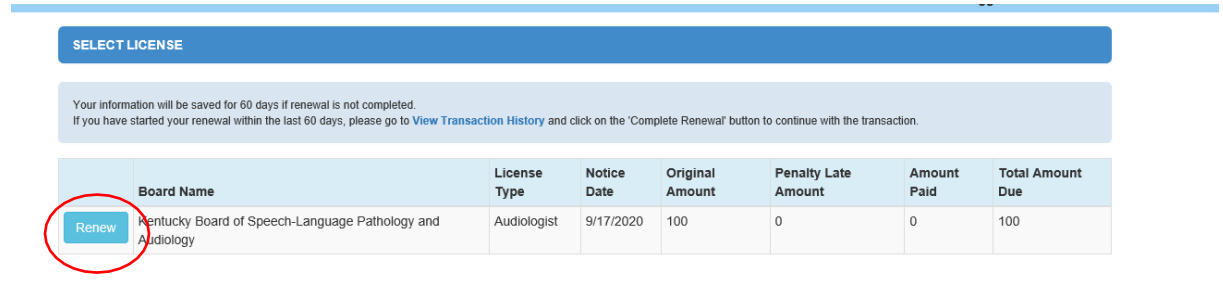
[LATEST NEWS](#)

[QUICK LINKS](#)

Once you get logged in, select the “License Renewal” option from the main menu.



- Click the “Renew” button off to the left-hand side See screen shot below.



© Commonwealth of Kentucky. All rights reserved.

- You may be asked to enter your birthdate and original licensure date. Original Licensure date can be a general date and does not have to be exact.

The image shows a registration form with the following fields and controls:

- First Name: Enter First Name
- Middle Name: Enter Middle Name
- Last Name: Enter Last Name
- Prefix Name: Enter Prefix Name
- Suffix Name: Select Suffix N. (dropdown)
- Maiden Name: Enter Maiden N
- SSN: Enter SSN
- Gender: Female (dropdown)
- Date of Birth: |MM/DD (calendar icon)

The Date of Birth field is circled in red.

- After clicking the “Continue” button, the next screen will ask you a few questions – please select “Yes” or “No” for each question.

If you select “Yes” for questions #2 and/or #3, you will need to upload documentation from your computer/mobile device such as a Word or PDF document. If applicable, ***please upload a signed affidavit*** explaining the conviction and/or disciplinary action and the outcome of the conviction and/or disciplinary action.

- After clicking the “Continue” button, you will be required to enter your **CONTINUING EDUCATION** information. We strongly encourage you to set aside uninterrupted time to submit your renewal early and have all of your CE course information at hand ready to enter (course name, completion date, CE course provider name, amount of hours).


CONTINUING EDUCATION

Continuing Education

Each Licensee shall obtain a minimum of fifteen (15) continuing education hours during the licensure year. All hours shall be in or related to the field of diabetes education. Each licensee shall maintain a record of all continuing education hours attended for two (2) years after attending a course.

List Below the units of continuing education obtained, INCLUDING DATE AND HOURS COMPLETED. Incomplete forms will be returned. DO NOT ATTACH DOCUMENTATION UNLESS YOU ARE AUDITED. It is your responsibility to maintain all documentation.

List hours carried over from last year's renewal (No more than fifteen (15) may be carried over)

Course Name	<input type="text"/>
Completion Date	<input type="text" value="MM/DD/YYYY"/> 
Provider Name	<input type="text" value="Select Approved Provider"/>
Course Hours	<input type="text"/>

You must select "Add Course" after each entry

I, the applicant in the above, do hereby certify under penalty of law that the information contained herein is true, correct, and complete to the best of my knowledge and belief. I am aware that, should an investigation at any time disclose any such misrepresentation or falsification, my application could be rejected or my license revoked by the Kentucky Board of Licensure for Diabetes Educators.

I Agree

- **Continue moving through your renewal until you reach the payment screen.** Here, you can enter payment information from your debit card, credit card, or checking account. Please give the system a few moments to complete the transaction after clicking submit.
- You may return to the main menu to **print off an updated wallet card and/or certificate** if you like, as our office no longer mail these items. You will receive an automated email within a few business days, letting you know your renewal has been processed.