



State of Vermont
Office of the Secretary of State

Office of Professional Regulation
89 Main Street, 3rd Floor
Montpelier, VT 05620-3402
sos.vermont.gov

James C. Condos, Secretary of State
Christopher D. Winters, Deputy Secretary
S. Lauren Hibbert, Director

APPLICATION FOR PRELIMINARY SUNRISE REVIEW ASSESSMENT

1. Profession/Occupation seeking regulation:

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2. Person/Organization submitting application:

Name:	
Organization:	
Address: Street/City/State/Zip	

Phone:		Cell Phone:	
Fax:		E-Mail:	

3. Vermont Society/Association (Attach copies of Standards of Practice and Code of Ethics)

Name:	
Contact Person:	
Address: Street/City/State/Zip	

Phone:		Cell Phone:	
Fax:		E-Mail:	

4. National Society/Association (Attach copies of Standards of Practice and Code of Ethics)

Name:	
Contact Person:	
Address: Street/City/State/Zip	

Phone:		Cell Phone:	
Fax:		E-Mail:	

5. Does the National Organization have a license or certification process? If "Yes", attach supporting documentation.	YES	NO
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6. List other states currently regulating this profession/occupation. For each state attach copies of the laws and rules.

**7. Define the services provided by this profession/occupation. What is the Scope of Practice?
(If space provided is insufficient, attach additional sheets as needed.)**

8. What harm or danger to the health, safety, or welfare of the public can be demonstrated if the practice of this profession/occupation were to remain unregulated? *Note: The potential for harm must be recognizable and not remote of speculative.*
(If space provided is insufficient, attach additional sheets as needed.)

9. What benefit can the public reasonably expect if this profession/occupation is regulated and how would it be measured?
(If space provided is insufficient, attach additional sheets as needed.)

10. Why isn't the public protected from unprofessional practitioners through means other than regulation? (For example, criminal penalties, consumer fraud laws, small claims court, civil litigation, etc.?)

(If space provided is insufficient, attach additional sheets as needed.)

11. Are you seeking:

Licensure

Certification

Registration

(See 26 V.S.A. § 3101 a. Definition)

12. a. What other regulated professions/occupations perform similar services to those of this profession/occupation?

12. b. How will the program distinguish between or among respective scopes of practice?

(If space provided is insufficient, attach additional sheets as needed.)

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13. How many practitioners of this profession/occupation do you estimate are practicing in Vermont?

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14. Estimate the percentage of the practitioners practicing in the following settings.

Independent	Clinics	Hospitals	Other

15. Is formal education required? (If "Yes", complete below.)

Yes

No

Education Requirements

Where may this education be obtained?

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16. Is supervised experience required in addition to, or instead of, formal education? (If "Yes", complete below.)		Yes	No
Education Requirements			
Where may this experience be obtained?			
17. Is there a National examination? (If "Yes", complete below.)		Yes	No

Name and address of examination agency

Name of Agency	
Street	
City/State/Zip	

18. Does this professional/occupation need continuing education? <i>(If "Yes", complete below.)</i> <i>(If space provided is insufficient, attach additional sheets as needed.)</i>		Yes	No

19. Based on the criteria you proposed as a requirement to become licensed/certified/registered, estimate how many of the current practitioners will qualify?	
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20. What transitional provisions/"grandfather provisions" do you propose for current practitioners to obtain licensure/certification/registration?

(When space provided is insufficient, attach additional sheets as needed.)

- 21. Attach copies of any proposed legislative bill(s) related to this request.**

- 22. Attach a list of all interested persons or groups in favor of, or opposed to, this request. Have they been consulted?**

- 23. Include any statistical data on disciplinary actions for this profession/occupation in other states.**

- 24. What is the applicant seeking to gain through regulation of the occupational group? What benefit does regulation bring to members of this occupational group?**

Go to: Administrative Rules for Procedures for Preliminary Sunrise Review Assessments

Email questions and comments about these pages to:

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