



New Jersey Department of Education (NJDOE) Office of Special Education (OSE)

Introduction to Clinic/Agency Application:

- A. The approval process for clinics/agencies is to ensure that only those applicants that meet the high standards set by OSE to provide services to students with disabilities are approved. The process will take 6 to 8 months from the submission of the initial application to final approval.
- B. Clinics or agencies with fewer than three (3) service individual service providers are not eligible to seek approval and/or maintain approval as a clinic/agency through the NJDOE.
- C. If an agency is approved to provide services, the agency must have service provider(s) to provide the service on staff, otherwise, the agency will no longer be approved to provide such service(s) (N.J.A.C.146A:14-5.2).
- D. Credentialing and Licensing requirements for each service are located within the section marked "Required Credentials of Service Providers" and "Relevel Regulations/Guidance" for each service.

"Part One: Submission and Review of Completed Application (Minimum of 3 Months)

1. Email completed application to clinicagency@doe.nj.gov
2. Staff from the OSE will review the application and the document will be:
 - Accepted as submitted.
 - Returned for revisions.
 - Denied as submitted.
3. The OSE will provide a letter to the applicant with the approval status of the application.

Part Two: Memorandum of Understanding (Minimum of 2 Months)

1. When an application is determined to be in order, the Office of Special Education will notify the Office of Student Protection (OSP).
2. The OSP will send the applicant a Memorandum of Understanding (MOU). The MOU is a required agreement between the applicant and the NJDOE that specifies how service providers will undergo the criminal history review process while working for that clinic/agency. The MOU permits the service providers of that clinic/agency to work in multiple schools or school districts simultaneously as long as the service providers continuously work for that clinic/agency.
3. The applicant must sign and notarize the MOU and return to the OSP.
4. The MOU is reviewed and approved by the Office of the Attorney General.
5. The OSP will return the completed MOU to the applicant. A Vendor Registration Form will be included with the approved MOU. This form will include a vendor-specific code that must be used when obtaining Criminal History Reviews (CHRs) for clinic/agency staff.

Part Three: Criminal History Reviews (6 Weeks Upon Receipt of Submission)

1. All service providers listed in the application must obtain a criminal history review (CHR) using the vendor specific code.
2. For more information regarding the procedures for obtaining a criminal history review, go to the NJDOE [Office of Student Protection](#) website.
3. The applicant must ensure that a copy of each service provider's criminal history review approval is submitted to OSE.

4. The applicant will be notified if any of the providers have been disqualified based on the criminal history review. Disqualification of a service provider may affect approval of the clinic/agency application.
5. Upon completion of the CHRs, the OSE will provide a letter to the applicant containing information on required clinic/agency procedures and a Certificate of Assurances.
6. When OSE receives all the criminal history review approvals, OSE will issue a letter of all current clinic/agency procedures for maintaining approval along with a Statement of Assurances.

Part Four: Final Approval (2 Weeks from Receipt of Submission of CHRs)

1. OSE will issue a final approval letter.
2. Information for the clinic/agency will be added to the NJDOE directory and the clinic/agency may contract with schools or school districts to provide services to eligible students.

NJDOE Clinic Application starts on the following page.



**New Jersey Department of Education (NJDOE)
Office of Special Education**

Clinic/Agency Initial/Amendment Application

Which type of application are you submitting? Select one:

Initial Application

Amendment

Part 1: Contact Information

Name of Clinic/Agency: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

County: _____

Website: _____

Name of clinic/agency administrator/primary point of contact: _____

Phone, Cell Phone, Fax Number (please indicate which type): _____

Email: _____

If another corporation/entity owns the clinic/agency, complete the following:

Name of Corporation/Entity: _____

CEO/Chief Administrative Officer: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

County: _____

Phone, Cell Phone, Fax Number (please indicate which type): _____

Email: _____

Date of Application Submission: _____

Part 2: Selection of Services

Instructions

- Select the service(s) for which the applicant is seeking approval.
- For each service selected, indicate the location(s) where services will be provided.
- Ensure that providers have the required credentials.
- Read the relevant special education regulations and requirements for each service to be provided. The regulations can be found in Subchapter Five at N.J.A.C.6A:14.
- For auxiliary and remedial services (Supplementary Instruction, English as a Second Language and Compensatory Education Services) provided to students enrolled in nonpublic schools, also review the guidance issued by the Office of Nonpublic School Services. The guidance document may be found at: [Guidelines for Auxiliary Services and Remedial Services \(Chapters 192 and 193 for Nonpublic School Students\)](#)
- Review additional guidance and information in the document “Clinic and Agency Requirement.”

1. Independent Child Study Team (CST) Evaluation in accordance with N.J.A.C.6A:14-2.5.

An independent child study team (CST) evaluation may be requested by a parent after the school district or charter school has conducted an initial or reevaluation. It is considered a second opinion conducted by certified professionals that are not employed by the school district or charter school. The evaluations include a psychological evaluation, a learning evaluation and/or social history evaluation. A clinic/agency may provide one, two or all three types of evaluation (psychological, learning, or social history).

a. Location of Service (select all that apply):

- Onsite at a clinic location approved by the NJDOE.
- Offsite at Public Schools, Charter Schools, Approved Private Schools for Students with Disabilities (APSSDs), Nonpublic Schools.
- Offsite at the student’s location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Standard NJ certification for the following: <ul style="list-style-type: none">• Learning Disabilities Teacher–Consultant (LDT-C)• School Psychologist• School Social Worker	<ul style="list-style-type: none">• N.J.A.C. 6A:14-2.5(c)• N.J.A.C.6A:14-3.4• N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5)

2. CST Services to supplement existing local district services.

a. Location of Service (select all that apply):

- Onsite at a clinic location approved by the NJDOE.
 Offsite at Public Schools, Charter Schools, and APSSDs.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Standard NJ certification for <ul style="list-style-type: none"> • Learning Disabilities Teacher–Consultant (LDT-C) • School Psychologist • School Social Worker 	<ul style="list-style-type: none"> • N.J.A.C.6A:14-2.5(a) and (b) • N.J.A.C.6A:14-3.4 • N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5)

3. Speech-Language Services (SLS).

Provided by a speech-language specialist when a district or approved private school is unable to hire sufficient staff to provide the service. May include evaluation/reevaluation, IEP development, and direct therapy.

a. Location of Service (select all that apply):

- Onsite at a clinic location approved by the NJDOE.
 Offsite at Public Schools, Charter Schools, APPSDs and Nonpublic Schools.
 Offsite at the student’s location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Standard NJ Speech-Language Specialist certification. Please note: The speech correctionist certificate is no longer valid.	<ul style="list-style-type: none"> • N.J.A.C.6A:14-2.5 • N.J.A.C.6A:14-3.1 through N.J.A.C.6A:14-3.9 (Subchapter 3) • N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5) If providing services in nonpublic schools, review: N.J.A.C.6A:14-6.1 and N.J.A.C.6A:14-6.2

4. Occupational Therapy (OT) Services.

May include evaluation & reevaluation, IEP and/or Service Plan development, and direct therapy.

a. Location of Service (select all that apply):

Onsite at a clinic location approved by the NJDOE.

Offsite at Public Schools, Charter Schools, APPSDs and Nonpublic Schools.

Offsite at the student's location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
<ul style="list-style-type: none">• Standard NJ School Occupational Therapist certification; and• NJ Occupational Therapist license issued by the NJ Division of Consumer Affairs.	<ul style="list-style-type: none">• N.J.A.C.6A:14-2.5• N.J.A.C.6A:14-3.1 through N.J.A.C.6A:14-3.9 (Subchapter 3)• N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5) <p>If providing services in nonpublic schools, review: N.J.A.C.6A:14-6.1 and N.J.A.C.6A:14-6.2</p>

5. Physical Therapy (PT) Services.

May include evaluation & reevaluation, IEP and/or Service Plan development, and direct therapy.

a. Location of Service (select all that apply):

- Onsite at a clinic location approved by the NJDOE.
- Offsite at Public Schools, Charter Schools, APPSDs and Nonpublic Schools.
- Offsite at the student’s location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
<ul style="list-style-type: none"> • Standard NJ School Physical Therapist certification; and • NJ Physical Therapist License 	<ul style="list-style-type: none"> • N.J.A.C.6A:14-2.5 • N.J.A.C.6A:14-3.1 through N.J.A.C.6A:14-3.9 (Subchapter 3) • N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5) <p>If providing services in nonpublic schools, review: N.J.A.C.6A:14-6.1 and N.J.A.C.6A:14-6.2</p>

6. Counseling.

May include assessment for, and development of, IEP or Service Plan goals and objectives, direct counseling services.

a. Location of Service (select all that apply):

- Onsite at a clinic location approved by the NJDOE.
- Offsite at Public Schools, Charter Schools, APPSDs and Nonpublic Schools.
- Offsite at the student’s location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
<p>Standard NJ certification:</p> <ul style="list-style-type: none"> • School Social Worker • School Psychologist, or, • NJ Social Work License • NJ Psychologist License 	<ul style="list-style-type: none"> • N.J.A.C.6A:14-2.5 • N.J.A.C.6A:14-3.1 through N.J.A.C.6A:14-3.9 (Subchapter 3) • N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5) <p>If providing services in nonpublic schools, review: N.J.A.C.6A:14-6.1 and N.J.A.C.6A:14-6.</p>

7. Behavior Modification Services.

May include conducting a functional behavioral assessment (FBA), development of a behavioral intervention plan (BIP), and direct intervention with students.

a. Location of Service (select all that apply):

- Onsite at a clinic location approved by the NJDOE. Offsite at Public Schools,
- Offsite at Charter Schools, APSSDs and Nonpublic Schools.
- Offsite at the student's location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
<ul style="list-style-type: none"> • NJDOE School Certification. • Board Certified Behavior Analyst (BCBA). • Board Certified Assistant Behavior Analyst (BCaBA). • Board Certified Behavior Analyst-Doctoral (BCBA-D). • If the provider does not have any of the above credentials, the service provider must hold at a minimum, a bachelor's degree in education, psychology, or a related field such as Applied Behavioral Analysis, Behavioral Sciences, Child Development, Child Psychology or Social Work; and/or from an accredited institute of higher education. • If the provider does not have a BCBA, BCaBA, BCBA-D or a NJDOE teacher certificate, the agency will need to submit a copy of the provider's official college transcript when submitting provider credentials to the OSE. 	<ul style="list-style-type: none"> • N.J.A.C.6A:14-3.1 through N.J.A.C.6A:14-3.9 (Subchapter 3) • N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5) <p>If providing services in nonpublic schools, review: N.J.A.C.6A:14-6.1 and N.J.A.C.6A:14-6.2</p>

Required for Provision of Service
<p>Note: The New Jersey Department of Education, Office of Special Education (OSE) cannot approve providers without licensure, certification, or a bachelor's degree to provide any service through a clinic or agency. Registered behavioral technicians (RBTs) and/or paraprofessionals who do not have meet the degree requirements do not meet the minimum standards for approval by the OSE. LEAs and nonpublic schools may <i>not</i> contract with clinics/agencies for the services of RBTs and/or paraprofessionals who do not meet the degree requirements.</p> <p><input type="checkbox"/> Clinic/Agency acknowledges all specialists in behavior modification shall work under the supervision of certified district board of education personnel.</p>

8. Home Instruction to replace academic instruction at school, per N.J.A.C. 6A:14-4.8, Program criteria: home instruction.

A student with a disability shall have his or her IEP implemented through one-to-one instruction at home or in another appropriate setting.

Note: the location of service is offsite at the student's location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Requires standard NJ teacher certification: Teacher of Students with Disabilities or certification by subject and/or by grade. For a list of certifications, go to NJDOE Certification and Induction: Certification Subject Area/Grade Level and Codes	<ul style="list-style-type: none">• N.J.A.C.6A:14-4.8• N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5)

9. Home Instruction to replace academic instruction at school, per N.J.A.C. 6A:16-10.1.

Home or out-of-school instruction due to a temporary or chronic health condition (includes both general education and special education students).

Note: the location of service is offsite at the student's location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Requires standard NJ teacher certification: Teacher of Students with Disabilities or certification by subject and/or by grade. For a list of certifications, go to NJDOE Certification and Induction: Certification Subject Area/Grade Level and Codes	<ul style="list-style-type: none">• N.J.A.C.6A:16-10.1• N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5)• Guidelines for Auxiliary Services and Remedial Services (Chapters 192 and 193 for Nonpublic School Students)

10. Home Instruction to replace academic instruction at school, per N.J.A.C. 6A:16-10.2.

Home or out-of-school instruction for a general education student for reasons other than a temporary or chronic health condition

Note: the location of service is offsite at the student's location.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Requires standard NJ teacher certification: Teacher of Students with Disabilities or certification by subject and/or by grade. For a list of certifications, go to NJDOE Certification and Induction: Certification Subject Area/Grade Level and Codes	<ul style="list-style-type: none">• N.J.A.C.6A:16-10.2• N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5)• Guidelines for Auxiliary Services and Remedial Services (Chapters 192 and 193 for Nonpublic School Students)

11. Evaluation, determination of eligibility, classification, and the development of a service plan for nonpublic school students.

Please note: Approved clinics/agencies must employ a full child study team.

Note: The location of service is offsite at a nonpublic school.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Requires standard NJ certification for each discipline: Learning Disabilities Teacher - Consultant (LDT-C), School Psychologist and School Social Worker.	<ul style="list-style-type: none">• N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5)• N.J.A.C.6A:14-6.1 and N.J.A.C.6A:14-6.2.

12. Supplementary Instruction.

Provided to nonpublic students eligible for special education as an addition to the primary instruction for the subject being taught.

Note: the location of service is offsite at a nonpublic school.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Requires standard NJ general education teacher certification by subject and/or by grade. Certification Subject Area/Grade Level and Codes	<ul style="list-style-type: none">• N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5)• Guidelines for Auxiliary Services and Remedial Services (Chapters 192 and 193 for Nonpublic School Students)

13. English as a Second Language provided to nonpublic students who are identified as English Language Learners.

Note: the location of service is offsite at a nonpublic school.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Requires standard NJ English as a Second Language certification.	<ul style="list-style-type: none"> • N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5) • Guidelines for Auxiliary Services and Remedial Services (Chapters 192 and 193 for Nonpublic School Students)

14. Compensatory Education in English Language Arts and mathematics provided to eligible nonpublic school students in accordance with an individual student improvement plan.

Note: the location of service is offsite at a nonpublic school.

Required Credentials of Service Providers	Relevant Regulations/Guidance
Requires certification as a Teacher of Supplemental Instruction in Reading and Mathematics, Grades K–8. Teacher of Students with Disabilities Teacher of English Teacher of Mathematics Elementary School Teacher Grades K-6 Middle School with Subject Matter Specialization: Language Arts/Literacy Specialization in Grades 5-8 Middle School with Subject Matter Specialization: Mathematics in Grades 5-8	<ul style="list-style-type: none"> • N.J.A.C.6A:14-5.1 and N.J.A.C.6A:14-5.2 (Subchapter 5) • Guidelines for Auxiliary Services and Remedial Services (Chapters 192 and 193 for Nonpublic School Students)



15. School Nurse for Nonpublic Schools.

An on-going position as a school nurse in a nonpublic school.

Note: The location of service is offsite at a nonpublic school.

Required Credentials of Service Providers	Relevant Regulations/Guidance
<ul style="list-style-type: none"> • An active license issued by the NJ Division of Consumer Affairs as a Registered Professional Nurse (RN). In accordance with N.J.A.C. 6A:16-2.5. • A School Nurse Certificate issued by the NJ Department of Education is not required. 	<ul style="list-style-type: none"> • N.J.A.C.6A:16-2.5 • N.J.A.C.6A:14-3.1 through Subchapter 3.9; • N.J.A.C.6A:9: Professional Standards; • N.J.A.C. Title 13 Department of Law and Public Safety, Division of Consumer Affairs (for occupational licenses); • N.J.S.A.18A:46A-1 et seq, Auxiliary Services (Nonpublic Services (Nonpublic Schools)); and, • Section 504 of the Rehabilitation Act of 1973.

16. Substitute Public School Nurse.

A temporary assignment when the NJ certified school nurse employed by a public school district (LEA) or approved private school for students with disabilities is absent.

Note: The location of service is offsite at a public school.

Required Credentials of Service Providers	Relevant Regulations/Guidance
<p>An active license issued by the NJ Division of Consumer Affairs as Registered Professional Nurse (RN) and one of the following certifications issued by the NJ Department of Education:</p> <ul style="list-style-type: none"> • For a non-instructional substitute: A Non-Instructional Substitute School Nurse Certificate or a Non-Instructional Standard School Nurse Certificate. • For an instructional substitute - school nurse teaching health related classes: An Instructional Substitute School Nurse Certificate or a Standard Instructional School Nurse Certificate. 	<ul style="list-style-type: none"> • N.J.A.C.6A:16-2.5 • N.J.A.C.6A:9, Professional Standards • N.J.A.C.6A:14-3.1 through Subchapter 3.9; • N.J.A.C. Title 13 Department of Law and Public Safety, Division of Consumer Affairs (for occupational licenses) <p>Please note: Time limitations on the number of days a substitute may serve in the same position is dependent upon the required credentials noted above. For more information, contact the County Office of Education in the county where the school or school district is located or visit the NJDOE website at: Certification and Induction: Substitute Credentials.</p>

Part 3: Service Providers and Credentials

Instructions:

1. Clinics/Agencies are required to have a **Minimum of three (3)** professional direct service providers and/or at least one direct service provider per service. If amending an already approved agency, your agency will only need one provider unless the service requires more than one provider.
2. Complete the credential information for each service provider. Attach additional sheets as necessary.
3. Submit copies of provider licenses or certificates.

Clinic/Agency Name:

Name of Individual Service Provider	Please attach copies of provider's NJEd certificate. If no certificate or license (for Behavior Modification Services)-attach official college transcript.	NJ Division of Consumer Affairs License Number (if a license is required)	NJ Division of Consumer Affairs License Expiration Date	Direct Service(s) to be provided. Select the service as indicated on the application.

Part 4: Service Providers and Credentials for School Nursing Services

Instructions:

1. List the name of each nurse and complete the information in the relevant columns. All nurses are required to have a current license issued by the NJ Division of Consumer Affairs.
2. Within the “Services to Be “Provided” place a (X) in appropriate columns.
3. For clinic/agency approval, a minimum of three (3) or more nurses must be listed. Make additional copies of this form as needed.
4. Submit copy of NJDOE certificate or substitute certificate issued by the County Office.

Clinic/Agency Name:

Name of Service Provider	Service: Nonpublic School Nurse (active RN License)	Service: Substitute School Nurse (Active RN License) NJDOE Standard Certificate	NJ Division of Consumer Affairs License Number and expiration Date	For Substitute School Nursing services, please attach copy of NJEd certificate or Substitute Certificate issued by the County Office or school district is located. Please visit the NJDOE website at: Certification and Induction: Substitute Credentials.

Part 5: Delivery of Services and Operating Procedures

- New clinic/agency applicants are required to answer questions numbers 1 through 4. If an approved agency is seeking to change location of services, please answer number 1.
- Initial and amendment applicants, if applying for Physical Therapy Assistant and/or Occupational Therapy Assistant must check off all applicable acknowledgement statements.

1. The new clinic/agency applicant will be providing services as (select all that apply):

- a. A clinic providing services **onsite** from the location of the business.
- b. An agency sending qualified providers **offsite** to the public school, charter school, Approved Private School for Students with Disabilities, and/or nonpublic school.
- c. An approved clinic agency seeks to amend their delivery of services to either the following (select one):
 - i. Onsite from the location of the business
 - ii. Offsite to the public school, charter school, Approved Private School for Students with Disabilities, and/or nonpublic school.

2. Identify the staff member(s) responsible for ensuring the validity of staff licenses, criminal history approvals, and other credentials:

3. State the days and hours of clinic/agency operation:

4. Describe how the clinic/agency will maintain coordination and communication with the school districts or schools:

Please check the following statements to acknowledge compliance:

- If hiring non-certified providers, such as certified occupational therapy assistants (COTAs), Physical Therapy Assistants (PTAs), clinic/agency acknowledges COTAs and PTAs, shall work under the supervision of an appropriately licensed and, where applicable, certified provider and in the presence and under the supervision of a certified occupational therapist and certified physical therapist.
- The Clinic/Agency will maintain clinic/agency procedures for ensuring the validity of staff licenses, criminal history approvals, and other credentials through the [NJDOE Office of Credentials and Licensing](#) and/or the [Behavior Analyst Certification Board](#) and/or the [NJ Division of Consumer Affairs](#) and the [NJDOE Office of Student Protection](#).
- Clinic/agency acknowledges to maintain policies and procedures for collecting, maintaining, and verifying the monthly service logs.
- Clinic/Agency acknowledges assurance of the maintenance of a log, which includes the following: a list of services provided, date, time, and location of the services provided; and the names of the professional staff providing each service.

Part 6: Required Business Documents

If application is an initial application or if amending an existing clinic/agency of either of the following: Onsite Location, Ownership and/or adding an additional Onsite location.

Submit the following required documents with your application and check each item that is attached

- A valid certificate of incorporation or certificate of formation. Where appropriate, any licenses or permits required by ordinances in effect within where the state, county, or municipality where the clinic or agency provides its services shall be provided, as per N.J.A.C. 6A:14-5.2(a) 1

If providing services **on-site at the clinic location**, as per N.J.A.C. 6A:14-5.2 (c) 2, you must attach the following:

- Certificate of Occupancy (CO).
- Valid fire, safety, and health inspection certificates.
- A description of the building, offices and grounds that demonstrates compliance with ADA regulations;
and
- If providing services in a trailer or mobile unit placed on nonpublic school property, attach the approval from the County Office of Education.

Part 7: Assurance Statement

In accordance with N.J.A.C. 6A:14-5.1 and 5.2 each approved clinic/agency assure compliance with the following policies:

1. The approved clinic/agency will not use the NJDOE approval to advertise, promote, or engage in activities that are not NJDOE approved.
2. School-certificated and state-licensed individuals will not use their school certificate title and/or state licensed title to advertise, promote, or engage in activities that are outside the scope of their school-certificated and/or state-regulated practice
3. All clinic/agency service providers shall have a **valid Criminal History Review (CHR) approval issued by the NJDOE Office of Student Protection** prior to providing services to students attending public school districts, school districts, approved private schools, and nonpublic schools.
4. Whenever a clinic/agency changes through merger or change in ownership, the clinic/agency shall notify the Office of Special Education (OSE) in writing of the change within seven (7) days of the change. The clinic/agency shall submit required documentation of the change as requested by OSE and/or the Criminal History Review Unit within seven (7) days of the request.
5. **Within seven (7) days of hire**, the clinic/agency will forward a completed Staff Change Request Form to OSE for each staff member providing direct services. **A valid Criminal History Review (CHR) approval issued by the NJDOE Office of Student Protection for each new service provider listed shall be attached.**
6. Approved clinic/agency services will not be initiated prior to the county office of education being notified of the district's purchase of services, with the exception of Independent Child Study Team evaluation and medical services; and documentation that the county office of education has approved the trailer/mobile units on nonpublic school property; and an executed written contract between the clinic/agency and the responsible public school district.
7. The clinic/agency administration and staff maintain current knowledge of, and provide services in compliance with, New Jersey Administrative Code (N.J.A.C.) 6A:14 (Special Education); Individuals with Disabilities Education Improvement Act 2004 (IDEA); N.J.A.C. 6A:32-7.3 et seq.(Student Records); Section 504 of the Rehabilitation Act of 1973; New Jersey Statutes Annotated (N.J.S.A.) 18A:46A-1 et seq. (Chapter 192, Laws of 1977); N.J.S.A. 18A:46-19.1 et seq. (Chapter 193, Laws of 1977); N.J.A.C. 6A:9 (Professional Licensure and Standards); N.J. Department of Law and Public Safety statutes and regulations governing licensed occupations; and other relevant state and federal laws, including but not limited to, regulations prohibiting the exclusion of any persons due to race, color, sex, creed, national origin or handicapping condition.
8. The clinic/agency administration and staff maintain current knowledge of, and provide services in compliance with, all relevant and applicable federal and state statutes and regulations.
9. The clinic/agency will comply with the applicable regulations for implementing N.J.A.C. 6A:32-7.3 et seq. Student Records, as defined in N.J.A.C. 6A:32.
 - a) Student records generated by a service provider at the responsible public school district will be stored, maintained, and accessed at the public school in accordance with N.J.A.C. 6A:32-7.5(e)5.
 - b) When the services are provided onsite at the clinic or agency, at the nonpublic school, at the approved private school, or at the student's home, the clinic/agency will assure that the student records:
 - c) Will be stored, maintained, and accessed by clinic or agency personnel in a manner consistent with student records code in accordance with N.J.A.C. 6A:32-7.4 and N.J.A.C.6A:32-7.5; and

- d) Will be forwarded to the responsible school district at least one time per year and/or upon completion of the service(s) to the student to enable the school district to fulfill its responsibilities under N.J.A.C. 6A:32-7 et seq.
 - e) When a parent or other authorized agency or organization as per N.J.A.C. 6A:32-7.5(a) requests access to student records that were generated by clinic or agency service providers, access will be requested of the school district and provided by the school district in accordance with N.J.A.C. 6A:32-7.6.
 - f) When a request for records by a parent or other third party is presented to the clinic/agency, the clinic/agency will forward the request to the school district and will provide the school district with the requested student record(s).
10. All student records generated by clinic or agency service providers are to be retained by the school district in accordance with N.J.A.C. 6A:32-7.
 11. Clinic/agency providers who are also employees of a district board of education, approved private school, or nonpublic school shall not provide services to students who are the responsibility of his/her employing district, approved private school, or nonpublic school.
 12. Clinic/agency services shall not occur during the hours of the provider's public-school employment approved private school employment, or nonpublic school employment.
 13. Professionals conducting evaluations in accordance with N.J.A.C. 6A:14-2.5 and 6A:14-3.4, shall be available during the typical school day (8:00 a.m. through 4:00 p.m.) to complete mandated classroom observations.
 14. A monthly service log shall be maintained for each student which includes, but is not limited to:
 - a) The name and title of the providers.
 - b) The school district responsible for payment.
 - c) The school that the student attends.
 - d) The services to be provided including frequency and duration as per the student's written plan (IEP, Services Plan or other required written plan);
 - e) The dates and times of service provision.
 - f) The total amount of service hours provided; and location where services were provided.
 - g) Signatures of providers, supervisors as appropriate, and a parent/guardian when service are provided in the home. (Does not apply to clinic/agencies providing School Nurse Services).
 15. The clinic/agency will maintain its facilities/buildings/offices in compliance with the Americans with Disabilities Act, (ADA) P.L. 101-336; and current municipal and/or county fire, safety, and health standards.
 16. The clinic/agency agrees to notify OSE within seven (7) days when the clinic/agency changes the location of its administrative office(s).
 17. The clinic/agency shall submit an amendment to OSE when the clinic/agency changes the location of onsite services or adds a location to provide onsite services.
 18. The clinic/agency agrees to retain a certified accounting agency or maintains an accounting system that complies with generally accepted accounting principles (GAAP).
 19. The clinic/agency agrees to comply with all applicable requirements promulgated by the Commissioner of Education and the State Board of Education regarding the Special Education Medicaid Initiative (SEMI), in response to requests by participating school districts.

- 20. The clinic/agency agrees that it will not subcontract or share service providers with another clinic/agency to provide services.
- 21. This Assurance Statement supersedes any previous Assurance Statements signed on behalf of the clinic/agency with regard to approval by the New Jersey Department of Education.
- 22. The approved clinic/agency has read and understood the regulations applicable to the services selected on this application and will adhere to the applicable regulations.

Assurance Certification

As the designated chief administrator, **I am legally authorized to submit this application on behalf of the clinic/agency named below.** I verify that the information, documentation, and attachments contained in this application are true, complete, and accurate, without any intent to mislead. I verify that I have read, understood, and agree to comply with the assurances on behalf of the clinic/agency. I understand that if any administrator, supervisor, employee, or contractor provides erroneous or misleading information, fails to provide required documentation, and/or acts in noncompliance with the NJDOE assurances or any state and federal statutes and regulations, NJDOE approval may be revoked.

Legal Name of Clinic/Agency: _____

Street: _____

City: _____ State: _____ Zip Code: _____

Name of Legally Authorized Official/Chief Administrator (print or type): _____

Title of Legally Authorized Official/Chief Administrator (print or type): _____

Signature of Legally Authorized Official: _____

Date (mm/dd/yy): _____

Email completed application to: clinicagency@doe.nj.gov

Acknowledgement of the Office of Special Education Clinic/Agency Procedures

I. After Approval:

- A. Adding other services to your clinic/agency requires an Amendment Application that describes the services, includes the credentials of the service providers, and an updated Assurance Statement. Please contact the NJDOE by email at clinicagency@doe.nj.gov to request an application.
- B. The clinic/agency must notify the NJDOE, in a timely manner, of changes in office location, contact personnel or changes in the organizational structure of the agency (e.g., merger, or sale of the clinic/agency to another entity). Please contact the NJDOE by email at clinicagency@doe.nj.gov to request the appropriate form.

II. Special Notice:

- A. Clinics and agencies are not permitted to subcontract with other clinics or agencies to share service providers. Please reference [NJDOE Approved Clinic and Agency Subcontracting and Staff Sharing Broadcast](#).

III. Continued Communication:

- A. The Office of Special Education (OSE) requires use of email to facilitate communication. The OSE will share pertinent information such as changes in clinic/agency procedures and updates in Department of Education requirements. In addition, approved clinics and agencies can utilize email communication to request information and to provide information regarding staff changes (hiring and termination of service providers) as required by regulation. The approved clinic/agency must establish an email account for the clinic/agency. The email account should meet the standards outlined here:
- B. The email address has the clinic/agency name as part of the address. For example:
 - 1. Mainstreettherapy@email.com
 - 2. Clinic@mainstreettherapy.com
- C. If there needs to be one central email address per clinic/agency for communication with this that is accessible to the clinic/agency director or coordinator and have the capability to accept large amounts of information (i.e., attachments) and to accept and reply to this office's emails.

IV. Clinic/Agency's designated Office of Special Education Email address:

V. Change Request Forms

- A. To notify the NJDOE that a service provider has been hired, complete the top of chart on the **Staff Change Request Form Criminal History Review (CHR) Approval** in accordance with N.J.A.C. 6A:14-5.2(a)4i. (within seven (7) calendar days whenever a professional staff member (service provider) leaves the agency, or a new service provider is hired. You may find the forms on the [NJDOE Special Education Directories](#) webpage (towards the bottom of the page)
- B. The form must be forwarded by email to clinicagency@doe.nj.gov. Please list the names of the service providers in the subject line of the email.

VI. Maintenance of Approval:

- A. After approval, a clinic or agency will be required to comply with the regulations set forth in the regulations governing DOE-approved clinics/agencies as well as Office of Special Education procedures to maintain their approval as outlined above.

Required: Please check off to acknowledge the to assure the procedures of the New Jersey Department of Education have been read and understood and the forms and documentation will be submitted as required. The applicant is also assuring they understand that if any administrator, supervisor, employee, or contractor provides erroneous or misleading information, fails to provide required documentation, and/or acts in noncompliance with the DOE procedures or any state and federal statutes and regulations, DOE approval will be revoked, and legal action may ensue.

Submission of Required Documents/Information

Required Document/Information	Yes/No
First page of application filled out and dated.	
Checked off services to be provided	
Part 3 and/or 4: Submitted credentials of three (3) individual providers	
Part 3 and/or 4: Submitted a provider qualified per service requested	
Part 5: Answered questions 1-4	
Part 5: Checked off acknowledgements	
Part 6: Submitted business formation paper and if out of state submitted NJ Business Registration Certificate	
Part 6: If providing services onsite, clinic/agency submitted all required building documents.	
Part 6: Submitted description of building that demonstrates compliance with ADA regulations.	
Authorized official signed the Assurance Statement	
Clinic/Agency provided an email address for agency according OSE's requirements and guidelines	
Reviewed Office of Special Education Clinic/Agency procedures	
Clinic/Agency checked off acknowledgement of the Office of Special Education Clinic/Agency procedures	

For NJDOE Office of Special Education Internal Use Only

Name of Reviewer: _____

Date of Review (mm/dd/yy): _____

The applicant is approved for the following services (select all that apply):

- Independent Child Study Team (CST) Evaluation
- CST Services to supplement existing local district services
- Speech Language Therapy Services
- Occupational Therapy Services
- Occupational Therapy Assistant Services
- Physical Therapy Services
- Physical Therapy Assistant Services
- Counseling Services
- Behavior Modification Services
- Home Instruction- as per N.J.A.C. 6A:14-4.8
- Home Instruction – as per N.J.A.C. 6A:16-10.2
- Home Instruction-as per N.J.A.C. 6A:16-10.1
- Substitute Public School Nurse

Nonpublic Services as the following (select all that apply):

- Evaluation, determination of eligibility, classification, and the development of a service plan for nonpublic school students.
- Supplementary Instruction
- English as a Second Language (ESL)
- Compensatory Education Services
- Nonpublic School Nurse