

Behavior Analyst Application Process

Step 1

First step in the application process is to verify that there is not an existing profile in the database.

1. Enter Social Security Number and
2. Security Code

The SSN will be encrypted before it is saved.

Check for Existing Analyst Profile

To pay your application fee online you must create a data profile in our system.

The next few screens will:

1. Begin your application process
2. Create your profile
3. Then take you to the shopping cart to pay your fee(s).

In the event applicant does not meet licensure requirements, application fees are **nonrefundable**.

For licensure as a Behavior Analyst, applicants must possess at minimum, a Master's degree, or equivalent, from an accredited educational institution. Additionally, applicants must possess and verify current and active certification by the Behavior Analyst Certification Board®, Inc. (BACB®) as a Board Certified Behavior Analyst® (BCBA®) or Board Certified Behavior Analyst-Doctoral® (BCBA-D®).

All applications must include certification documentation and any other relevant materials issued to applicant by the BACB®. Failure to include applicable documentation may cause delays in licensing process. **A PDF copy of this certification must be uploaded with your application.** You should have this available before you start.

All licenses issued by the Mississippi Autism Board shall be for a term of three (3) years; however, licensure by the Mississippi Autism Board shall not exceed the expiration of the licensee's certification by the BACB®. Failure to maintain certification with the BACB® by the licensee shall result in immediate revocation of license by the Mississippi Autism Board.

To begin, let's verify that you don't already have a profile. We'll do that by verifying your SSN.

Enter your SSN:

Enter this security code in the box below: 84185

Check

Step 2 section 1

If a profile with your SSN is not found, you will be taken to the application form. The top section is your personal information. You will need a passport style picture to upload. This picture should be less than 500kbs saved in either .jpg, or .gif or png format **NOTE:** Your personal email should not be a business email address; however, if you don't have a separate business email you may enter your personal email as your business email.

LICENSE APPLICATION

Mississippi Autism Board
The Regulating Board for Applied Behavior Analysis
P.O. Box 20 Jackson, MS 39205
Phone: (601) 359 - 6792; Website: www.msautismboard.ms.gov; Email: admin@msbop.ms.gov

BEHAVIOR ANALYST APPLICATION FORM

PERSONAL INFORMATION:
Applying for Behavior Analyst (Regular) (\$250.00 Application Fee)
Background Check Required (\$35.00 Fee)

Last Name: First Name: Middle Name:

Previous Names or Aliases: SSN: XXX-XX-6666

Date of Birth: Gender:

Personal E-Mail Address: Password:
Use this email and password to login to your online profile.

Are you a U.S. Citizen?

Are you a legal resident of MS? If NO, State of Residency:

Home Address: Home Address 2:

City: State: Zip Code:

Home Phone: Cell Phone:

Your Business Email: Your Business Phone:

Upload Your Passport Style Picture No file chosen

Step 2 section 2

The next section is information about your employer. There is a dropdown list of all organizations that are in the database. Please select where you will be working from this dropdown. If the organization is not in the dropdown enter the information about the organization in the boxes below the dropdown.

Select a copy of your current and active BCBA or BCBA-D certification to be uploaded and saved in the database.

Employer Information 

Employer/Organization Name:

If your Employer/Organization is not in the list above enter the name, address and phone below.

Name:

Address:

City: State: Zip Code:

Business Phone #:

Upload your current and active BCBA or BCBA-D certification through the Behavior Analysts Certification Board, Inc. 

Step 2 section 3

Enter your education information in the third section.

The completion date does not have to be the exact day. It can be just the month and year.

1. If you have other licenses that you wish to report, select Yes in the dropdown and after you submit this form, you will be take to a screen to enter the information about those licenses.

EDUCATION AND TRAINING: 

School:

City: State: Zip:

Type of Degree: Date of Completion:

School:

City: State: Zip:

Type of Degree: Date of Completion:

School:

City: State: Zip:

Type of Degree: Date of Completion:

Do you hold any other licenses? If yes you will be required to upload a copy of your license(s) on the next screen.  

Step 2 section 4

In Section 4 enter three 3 professional and one personal reference.

REFERENCES: 

List three professional and one personal reference willing and able to attest to your character and aptitude for licensure.

Name: <input type="text"/>	Phone: <input type="text"/>	Email: <input type="text"/>
Name: <input type="text"/>	Phone: <input type="text"/>	Email: <input type="text"/>
Name: <input type="text"/>	Phone: <input type="text"/>	Email: <input type="text"/>
Name: <input type="text"/>	Phone: <input type="text"/>	Email: <input type="text"/>

Step 2 section 5

The next section contains 6 questions. If you answer yes to any question, please provide a detailed explanation of the matter. There is also the option to upload supporting documents.

QUESTIONNAIRE: 

Please answer the following questions. **Note:** if you answer "YES" to any of the questions below, please enter as part of your application an explanation providing specific details, including disposition of the matter.

1. Have you ever been charged with or convicted of a felony or misdemeanor other than a traffic violation? Yes No

If Yes explain:

Supporting documents: No file chosen 

2. Have you ever had a complaint filed with a professional association or certifying, licensing, or registering body against you for alleged unethical behavior or unprofessional conduct? Yes No

If Yes explain:

Supporting documents: No file chosen

Step 2 section 6

This final section is your affirmation that all the information you have provided is true and that you will uphold the laws and standards of conduct set forth in the laws of the State of Mississippi.

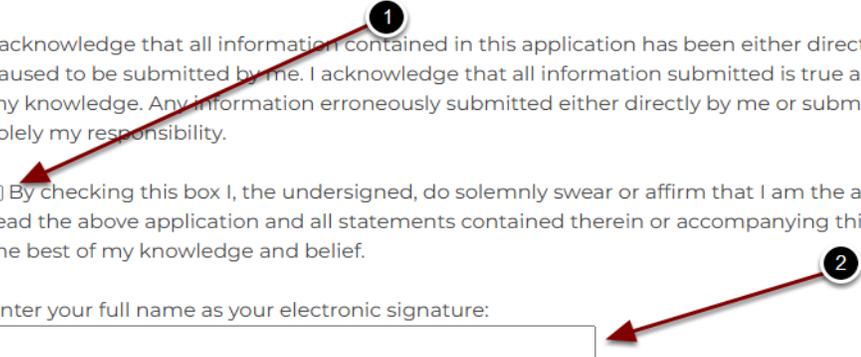
1. Check the box
2. Enter your full name

I agree to uphold the laws and standards of conduct set forth in the laws of the State of Mississippi pertaining to Behavior Analysts and/or Assistant Behavior Analysts. I also acknowledge that I have read the Mississippi Code of 1972 pertinent to Behavior Analysts and/or Assistant Behavior Analysts and the Rules and Regulations adopted by the Mississippi Autism Board (MAB).

I acknowledge that all information contained in this application has been either directly submitted by me or caused to be submitted by me. I acknowledge that all information submitted is true and correct to the best of my knowledge. Any information erroneously submitted either directly by me or submitted by my direction is solely my responsibility.

By checking this box I, the undersigned, do solemnly swear or affirm that I am the above applicant. I have read the above application and all statements contained therein or accompanying this application are true to the best of my knowledge and belief.

Enter your full name as your electronic signature:



Step 3

If you answered Yes to the question "Do you have other licenses?" on Step 2 screen 3, you will be taken to this screen to enter those licenses.

You may enter as many licenses as you have.

1. After you have added all of the licenses
2. Click Continue at the top of the form to go to the next screen.

Add Other License Information

2
Click Continue ONLY after you have added all your licenses!

Type/Title	Jurisdiction(s)	License Certificate
No License Found		
1 Add your other license(s). Once you have them all added, click the Continue button above to pay your application fee.		
Type/Title	Jurisdiction(s)	License Certificate
	<input type="button" value="Add"/> 1	<input type="button" value="Choose File"/> No file chosen

Step 4

After you have completed Step 2 and Step 3 (if required) you will be taken to the shopping cart to begin the payment process.

1. The current fee amount, (check the box to the left) and
2. License expiration date will be shown.
3. The Criminal Background Check is required and will automatically be checked.

Click Next

An online convenience fee is added to the amount in the shopping cart. You will see this amount after you choose your payment method but before you complete your payment.

Receipt Number: OL-1298
Check the box next to your license amount

Payment includes:		Amount
<input type="checkbox"/> \$ - New Licensee Application Fee through		\$0.00
<input checked="" type="checkbox"/> \$ - Criminal Background Check Fee (A fingerprint card is required to process your background check. The Board will mail you a fingerprint card with instructions.)		\$35.00
Total		\$0.00

Previous Reset Selection Next

Step 5

When you click Next you will be taken to the following screen that informs you that you are about to be taken to the State of Mississippi's Online Payment System.

Once you've read the page and are ready to continue, click the Continue with Payment button.

Checkout

At this time you will be taken to the State of Mississippi's Online Payment System to complete your license request.

Please click the button below to make your payment of \$285.00.
A convenience fee will also be added to the online payment. You will see the amount of this fee before you complete the payment.

[Back](#)

[Continue with Payment](#)

Payment Screen

Fill out the payment screens and then you will be returned to the MSAB web site to receive your receipt.

1 Payment Type 2 Customer Info 3 Payment Information 4 Submit Payment

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
000000021	This payment includes; Application Fee for Behavior Analyst; Criminal Background Investigation Fee	\$285.00	1	\$285.00
Total				\$285.00

Payment

Payment Type

Payment Type *

Select One ▼

Next >

Customer Information

Payment Information