

AER Accreditation Council Application Form

Current Openings:

\_\_\_ Field-Related Professional Representative

Name:

Job Title/Employer/Consumer Assoc Affiliation:

Phone Number:

Email Address:

Please attach a copy of your resume.

AERAC is committed to a diverse, inclusive, equitable, and accessible environment where all board members, staff, volunteers, and members feel respected and valued regardless of ability, gender, age, race, ethnicity, national origin, sexual orientation or identity, education, or any other bias.

Please indicate if you are Blind, Visually Impaired or wish to provide any other information related to our diversity policy:

Certifications/Licenses: Please write in all that apply (CATIS, TVI/TSVI, COMS, CVRT, CLVT, OTHER)

How many years have you worked in the field?

Please mark an X for each of your areas of expertise below (list continues on next page):

Administration

Human Resources

Finance

Program Evaluation

Independent Living Services

Counseling

PreSchool/Early Intervention

K-12 Programs

Low Vision Clinic Services

Vocational Services

Voc Counseling

Expanded Core Curriculum

Industries/Employment Services

Multiple Disabilities

Provision of Reading Materials

Other (please specify)

**PLEASE EMAIL COMPLETED FORM by May 31, 2023**

**TO:** [**accreditation@aerbvi.org**](mailto:accreditation@aerbvi.org)