

6. Have you ever served as an expert consultant/witness for any of the following?
 No Yes If yes, please indicate where you have served.

- American Physical Therapy Association
- A state licensing board other than the Physical Therapy Board of California
- An insurance company
- Attorney General's Office
- District Attorney's Office
- A civil case
- Other organization or program, please specify: _____

7. List any continuing education courses completed in the past three years.

8. Have you ever provided instruction at a physical therapist/physical therapist assistant educational program in the past five years?
 No Yes If yes, please name the educational program(s).

9. Have you ever served as a subject matter expert for the National Physical Therapy Examination and/or the California Law Examination?
 No Yes If yes, please indicate the examination and year.

- National Physical Therapy Examinations Year: _____
- California Law Examination Year: _____

10. Identify the counties in which you are willing to travel as an expert consultant and/or practice monitor.

By my signature below, I agree to abide by the Board Policy, "Expert Consultant/Practice Monitor Selection Criteria and Expectations". I understand that all information provided to me will be confidential and shall not be discussed with anyone unless so directed by the Physical Therapy Board of California. I agree to maintain all records in a secure or locked area, accessible to me only. I will provide a full written report and return all documents to the Physical Therapy Board of California within the guidelines established by the PTBC. I also agree to conduct onsite reviews if required by the Board.

Signature

Date

Please return completed application to:

Physical Therapy Board of California
Expert Consultant/Practice Monitor Application
2005 Evergreen Street, Suite 1350
Sacramento, CA 95815