



# Texas Board of Occupational Therapy Examiners

333 Guadalupe, Ste# 2-510  
Austin, Texas 78701-3942

512/305-6900 • 512/305-6951 fax  
<http://www.ptot.texas.gov>

## Occupational Therapy Assistant Supervision Form

Occupational Therapy Assistants must submit evidence of supervision. It is incumbent on the Occupational Therapy Assistants to keep the name of their supervisor current. Notify us with a revised copy of this form immediately with a change of jobs/supervisors. This information may also be completed online.

### Part I. To be completed by the occupational therapy assistant:

I certify that I will work under the supervision of an Occupational Therapist licensed to practice in Texas in accordance with the TBOTE rules.

Print name: \_\_\_\_\_

License#: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### Part 2. To be completed by supervising OTR:

I will provide supervision to the above-named individual, in accordance with the TBOTE rules.

Printed name: \_\_\_\_\_

Signature of Supervising OT/OTR: \_\_\_\_\_

Primary place of employment: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Area Code and phone: \_\_\_\_\_

License #: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Date: \_\_\_\_\_

*for staff use only*

Receipt Date: \_\_\_\_\_ Reviewed by: \_\_\_\_\_ Temp License # when issued: \_\_\_\_\_

