



KENTUCKY BOARD OF PHYSICAL THERAPY

312 Whittington Pkwy. #102
Louisville, Kentucky 40222
Phone (502) 429-7140
Fax (502) 429-7142
<http://pt.ky.gov>

**PHYSICAL THERAPIST SUPERVISOR REQUIREMENTS
INITIAL PLACEMENT OF A FOREIGN EDUCATED
PHYSICAL THERAPIST**

KRS 327.060 requires a foreign educated physical therapist candidate for Kentucky licensure to successfully complete board approved supervised practice under a physical therapist licensed in Kentucky. During this practice period, of not less than three months or more than six months, the candidate undergoes a Clinical Skills Assessment.

201 KAR 22:070 requires that these candidates work only in a facility that is **ACTIVELY INVOLVED** as a clinical education site for physical therapist students enrolled in a CAPTE accredited program in Physical Therapy, and under the supervision of a person who has been a clinical education supervisor within the last three years.

It is the belief of the Board that a physical therapist who is actively involved in the clinical education of PT students should be the best person to determine and document entry-level clinical competency of the foreign educated candidate.

Please complete both sides of this document which, when also signed by the foreign educated physical therapist candidate, is to be sent to the Board of Physical Therapy.

TEACHING/CLINICAL AFFILIATION AGREEMENTS

Name(s) of CAPTE accredited (Physical Therapist) School(s) of Physical Therapy your facility has an agreement(s) with: _____

Average number of PT students affiliating/year: _____

I have been assigned as clinical supervisor to one or more Physical Therapist students from schools referenced above within the 3 preceding years and this facility remains **AN ACTIVE CLINICAL**

EDUCATION SITE: _____ Yes _____ No

SUPERVISOR Signature: _____

Date: _____

NAME PRINTED: _____

KY PT License #: _____



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**SUPERVISORY AGREEMENT FOR PHYSICAL THERAPISTS
EDUCATED IN A FOREIGN COUNTRY**

201 KAR 22:070 requires this candidate to work only with on-site supervision by a physical therapist until he or she furnishes the board a favorable evaluation of on-site supervision performed by a clinical supervisor who utilizes the "Performance Evaluation Tool for Foreign Educated Therapists Completing Supervised Practice in the United States" copyrighted by the FSBPT.

The clinical supervisor shall submit the evaluation to the board after three (3) months of practice, and if required after the sixth month, when the required score denoting clinical competency shall have been reached. Documented competency must be achieved within six months.

I, physical therapist number, PT-_____ agree to provide supervision as required in 201 KAR 22:070 to the candidate listed below during the period it is required. I have read and understand KRS 327.060 and administrative regulations that pertain to the foreign educated physical therapist applicant and agree to provide documentation of competency and supervision required.

I further agree to advise the board if, for any reason, this agreement is terminated, and understand that each applicant must sit for, and pass the NPTE to continue to work as a physical therapist in Kentucky.

Anticipated start date	
<u>APPLICANT</u>	<u>SUPERVISOR</u>
_____	_____
Name	Name
_____	_____
Signature	Signature
_____	_____
Date of Signature	Date of Signature

FACILITY WHERE PRACTICE IS TO TAKE PLACE

_____				_____	
Facility Name				Street Address	

City	State	Zip	County	()	Work Telephone

(over)