## **EXPERIENCE DOCUMENTATION FORM**

### PART I (TO BE COMPLETED BY APPLICANT) \*

	Applicant's Name		CDPH Application
	Address		e-Mail Addres
	City, State, Zip Code	Last Four Digi	ts of Applicant's Social Security
*	MPLETED AND SIGNED BY THE IMPRIED TO BE ACCEPTABLE)	MEDIATE SUPERVISOR (	OR LABORATORY
1. PLEASE COM	PLETE: EXPERIENCE (INCLUDING	ON-THE-JOB TRAINING)	
Date experience started:	Month	Day	Year
Date experience ended:	Month	Day	Year
How many hours per week?		(Average, if necessary	<b>(</b> )
Guidelines for (NOTE: It is the	e applicant's responsibility to ensure the	ne experience is documente	
		<u>.                                    </u>	
	e applicant's responsibility to ensure the applicant's responsibility to ensure the applicant's responsibility	<u>.                                    </u>	
(NOTE: It is the		Biology	ed as required for eligibility
(NOTE: It is the	Reproductive	Biology	ed as required for eligibility
(NOTE: It is the	Reproductive  FIFICATION VERIFICATION. Please p  Embryology and/or Andrology Laboratory Scientist	Biology  place an X by each CERTIF  Embryology Laboratory Director (ABB)	ed as required for eligibility FICATION VERIFIED  High Complexity Lab Director H.C.L.D (ABB)

# PART V. BY SIGNING THIS FORM, I AS THE IMMEDIATE SUPERVISOR OR LABORATORY MANAGEMENT\* VERIFY THAT THIS APPLICANT HAS PERFORMED SATISFACTORILY IN THE AREAS CHECKED ON THIS FORM.

Applicant's Name	CDPH Application #
(Please Print) Immediate Supervisor or Laboratory Management* Name & Credential(s)	Title
Immediate Supervisor or Laboratory Management* Signature	Date
Telephone Number	e-Mail Address
Institution/Laboratory Name	CLIA#
City State Zin	

BE SURE TO INCLUDE A LETTER OF AUTHENTICITY FROM YOUR IMMEDIATE SUPERVISOR OR LABORATORY MANAGEMENT\* WITH THIS EXPERIENCE DOCUMENTATION FORM. THE LETTER OF AUTHENTICITY MUST BE PRINTED ON THE ORIGINAL LETTERHEAD. IT MUST STATE THAT THE EXPERIENCE DOCUMENTATION FORM WAS COMPLETED, SIGNED, AND DATED BY YOUR IMMEDIATE SUPERVISOR OR LABORATORY MANAGEMENT\*.

\*Management is defined as someone in a management role who can verify technical experience.

#### **GUIDELINES FOR EVALUATING THE EXPERIENCE OF A CANDIDATE**

AREA OF EXPERIENCE	EXTENT OF EXPERIENCE
REPRODUCTIVE BIOLOGY	Specimen collection, evaluation, and processing
	<ul> <li>Diagnostic and/or therapeutic testing for the management of primary and</li> </ul>
	secondary infertility, fertility assessment, and fertility preservation, as well as
	the evaluation and assessment of gametes and embryos and their associated
	fluids and tissues.
	<ul> <li>Instrument preventive maintenance and troubleshooting</li> </ul>
	Quality control / assurance
	Laboratory safety
	<ul> <li>Problem solving / troubleshooting</li> </ul>

#### **California Legislative Information**

#### SB-1267 (2021-2022)

1261. (a) (1) The department shall issue a clinical laboratory scientist's or a limited clinical laboratory scientist's license to each person who is a lawful holder of a baccalaureate or an equivalent or higher degree, who has applied for the license on forms provided by the department and has met the requirements of this chapter and any reasonable qualifications established by regulations of the department... SEE LINK

#### **DIVISION 2. HEALING ARTS [500 - 4999.129]...**

- (2) Prior to the adoption of implementing regulations and notwithstanding subdivision (c) of Section 1261.5, the department shall issue a clinical reproductive biologist scientist license to every applicant for licensure who has applied for the license on forms provided by the department, who holds a baccalaureate or an equivalent or higher degree in a chemical, physical, or biological science or clinical laboratory science, who is certified as an andrology laboratory scientist, an embryology laboratory scientist, or a technical supervisor of andrology or embryology by a certifying board in the specialty of reproductive biology, clinical andrology, or clinical embryology approved by the department, and who meets the qualifications of training, education, and experience specified in Section 1261.5.
- 1261.5 (a) The department may issue limited clinical laboratory scientist's licenses in chemistry, microbiology, toxicology, histocompatibility, immunohematology, genetic molecular biology, cytogenetics, laboratory genetics, reproductive biology, or other areas of laboratory specialty or subspecialty when determined to be necessary by the department in order for licensure categories to keep abreast of changes in laboratory or scientific technology. Whenever the department determines that a new limited clinical laboratory scientist license category is necessary, it shall adopt regulations identifying the category and the areas of specialization included within the category. (b) To qualify for admission to the examination for a special clinical laboratory scientist's license, an applicant shall have both the following:
  - (1) Graduated from a college or university maintaining standards equivalent, as determined by the department, to those institutions accredited by the Western Association of Schools and Colleges or an essentially equivalent accrediting agency with a baccalaureate or higher degree with a major appropriate to the field for which a license is being sought.
  - (2) One year of full-time postgraduate training or experience in the various areas of analysis in the field for which a license is being sought in a laboratory that has a license issued under this chapter or which the department determines is equivalent thereto.
- (c) Whenever a limited clinical laboratory scientist's license is established for a specific area of specialization, the department may issue the license without examination to applicants who had met standards of education and training, defined by regulations, and to applicants certified by a board approved for that certification by the department, prior to the date of the adoption of implementing regulations.
- (d) The department shall adopt regulations to implement this section. (Amended by Stats. 2022, Ch. 473, Sec. 8. (SB 1267) Effective January 1, 2023.)

<sup>\*</sup> FORM Modified from ASCP (Board of Certification) rev. April 2022.