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## MEMBER DIRECTORY LISTING INFORMATION

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You will be listed according to your chosen preferences on the Payment Form for both the Online Directory *and* the Printed Directory. You are unable to choose different listings for the directories. Please make sure to choose your preferences on the Payment Form located on the reverse side of this statement. You may choose *not* be listed in the Online Directory or Printed Directory. Only your *name* will be listed. This will allow you to have access to the Online Directory.

**Please note the following definitions of your choices:**

• **Do not list me in either directory.**

Your contact information will not be included in the Online Directory or Printed Directory. Only your *name* will be listed. This will allow you to have access to the online directory. You will *not* be able to make changes to your contact information online.

• **Please include all contact information in both directories.**

All contact information will be included in both directories. This includes address, home phone, work phone, fax, & email information. You will have full online access to update your contact information.

• **Please list the following contact information.**

You have the choice to omit any of the following contact information from both directories: address, home phone, work phone, FAX, & email. You will not be able to update any information you have chosen to omit.

**PLEASE NOTE THE FOLLOWING:**

CSHA does sell label orders & contact lists based on the materials the consumer will be using them for. Workshop information is sent to everybody regardless of their listing preferences. Any other materials are sent only to those who have chosen to list their address in the directories. However, those materials must first be approved by CSHA. **Only CSHA approved materials will be mailed to CSHA member listings.**

***If the preferences on the Payment Form have been left blank, you will be listed according to your previous choice(s) from your member application. Additionally, we cannot guarantee your contact information will or will not be listed online or printed. Please make sure to include your contact updates & listing preference(s) when submitting your dues payment.***

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## BILINGUAL PROFESSIONALS

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**INDIVIDUALS WHO WISH TO BE LISTED AS BILINGUAL PROFESSIONALS MUST SIGN THE BILINGUAL AGREEMENT LOCATED BELOW THAT INDICATES YOU HAVE READ AND CONCUR WITH THE FOLLOWING DEFINITION OF A BILINGUAL PROFESSIONAL:**

To be listed as a bilingual speech-language pathologist or audiologist you must be able to speak English as your primary language and speak (or sign) at least one non-English language with native or near native proficiency in lexicon (vocabulary), semantics (meaning), phonology (pronunciation), morphology/syntax (grammar), and pragmatics (uses) during clinical management. Additionally, the following abilities are necessary in order to provide appropriate bilingual assessment and remediation services in the client's language:

- 1) ability to describe the process of normal speech and language acquisition to both bilingual and monolingual individuals and how those processes are manifested in oral (or manually coded) and written language;
- 2) ability to administer and interpret formal and informal assessment procedures to distinguish between communication differences and communication disorders in oral or (manually coded) and written language;
- 3) ability to apply intervention strategies for treatment of communication disorders in the client's language, and
- 4) ability to recognize cultural factors which affect the delivery of speech-language pathology and audiology services to the client's language community.

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## BILINGUAL AGREEMENT

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By listing my name in the CSHA Foreign Language Directory, I agree to the definitions of a Bilingual Professional as described above.

**Bilingual Signature of Agreement:** \_\_\_\_\_

Please check applicable languages.

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|--------------------------|----|--------------------|--------------------------|----|---------------------|
| <input type="checkbox"/> | A. | Spanish            | <input type="checkbox"/> | H. | Sign Language - ASL |
| <input type="checkbox"/> | B. | Chinese, Mandarin  | <input type="checkbox"/> | I. | German              |
| <input type="checkbox"/> | C. | Chinese, Cantonese | <input type="checkbox"/> | J. | SEE Sign            |
| <input type="checkbox"/> | D. | Tagalog            | <input type="checkbox"/> | K. | Yiddish             |
| <input type="checkbox"/> | E. | French             | <input type="checkbox"/> | L. | Italian             |
| <input type="checkbox"/> | F. | Korean             | <input type="checkbox"/> | M. | Hebrew              |
| <input type="checkbox"/> | G. | Vietnamese         | <input type="checkbox"/> | N. | Other, specify:     |
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