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|  | TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL333 Guadalupe St., Ste. 3-900Austin, Texas 78701Tel.: (512) 305-7700www.bhec.texas.gov | For Agency Use Only |

**PROPOSED STUDY PLAN UNDER RULE 882.6**

PLEASE PRINT OR TYPE:

**I. Applicant Information**

Name (Last, First): Click or tap here to enter text.

**II. Exam Information**

Which exam are you studying for: Click or tap here to enter text.

Which attempt are you applying for? Choose an item.

Which content area appears to be your weakest? Click or tap here to enter text.

Which of the following, if any, do you believe detract from your ability to pass the exam?

[ ] Test anxiety

[ ] Diagnosed disability recognized under the ADA

[ ] Language barriers

[ ] Other: Click or tap here to enter text.

**III. Detailed Study Plan**

Please explain how you will prepare to re-take the exam in the space provided below or attach a written explanation.

By way of example, in preparation for your 4th attempt you may complete an exam preparation course and in preparation for your 5th or subsequent attempt you may complete another exam preparation course together with additional steps designed to address the content areas where you are weak.

When developing a study plan, you are strongly encouraged to consult with faculty from your training program, supervisors, and trusted colleagues to assist you with developing a plan designed to overcome all identifiable or persistent deficiencies.

Applicants are also encouraged to address how they believe the detractors identified above affect their ability to pass the exam, together with their plan for addressing these detractors.

Click or tap here to enter text.