



**NORTH CAROLINA BOARD OF
OCCUPATIONAL THERAPY**

SMALL GROUP STUDY FORM*

NORTH CAROLINA LICENSE NUMBER: _____

Last Name: _____ **First:** _____ **Middle/Maiden:** _____

Journal Article

Clinical Videotape

Audiotape

Title

Author

Publisher

Time Spent

Date of Completion

Co-Participants

Signature

License #

Statement describing how this activity relates to your current or anticipated roles and responsibilities:

***As stated in the Rules of the North Carolina Board of Occupational Therapy 21 NCAC 38 .0805:**

- (3) Small Group Study:
- (a) Includes review and discussion of journal articles, clinical videotapes or audiotapes by at least two licensed practitioners;
 - (b) A licensee shall earn one point for three contact hours up to a maximum of three points; and
 - (c) Documentation shall include title, author, publisher, time spent, and date of completion. Licensee must complete the Small Group Study Form provided by the NCBOT and include a statement that describes how the activity relates to a licensee's current or anticipated roles and responsibilities.