

**Physical Therapist Assistant Affidavit:**

**I cannot work as a PTA in South Dakota unless a South Dakota Licensed Physical Therapist Has Signed an Agreement that is submitted to the SD Board of Physical Therapy Office.**

I, \_\_\_\_\_, understand that I am permitted to maintain a South Dakota Physical Therapist Assistant license without a supervising Physical Therapist because I am not working as a PTA in South Dakota. This affidavit is being offered in lieu of the required supervision agreement.

If I obtain employment in South Dakota as a physical therapy assistant, I will first submit the PTA Supervision Registration Form to the SD Board of Physical Therapy office and receive approval before working as a physical therapy assistant.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

(SEAL)

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_