

Checklist: Licensed Mental Health Counselor

Complete the forms indicated below in the appropriate column for the type of education you have completed. Submit the forms, or request that they be submitted, to the Office of the Professions at the address at the end of each form. In the space provided on the checklist below, record the date you sent or requested the form to be sent. More information on completing the forms can be found on our web site at <http://www.op.nysed.gov/prof/mhp/mhcforms.htm> for licensure.

Checklist	A. Graduate of a NYS 60-semester hour Licensure-Qualifying program in mental health counseling or a degree in clinical mental health counseling from a program accredited by CACREP under the 2009 standards*		B. Graduate of a master's or higher degree in mental health counseling, determined by the Department to be the substantial equivalent of a NYS Licensure-Qualifying program based on individual transcript review**		C. Limited Permit To request authorization to practice under supervision of a qualified supervisor in an authorized setting while meeting the examination & experience requirements***		D. Endorsement of LMHC license issued in another jurisdiction Licensed as a LMHC in another jurisdiction on the basis of comparable education, supervised experience and examination, as determined by NYSED, and verification of at least 5 years of LMHC independent practice in 10 years prior to application in New York	
	Required	Date Sent	Required	Date Sent	Required	Date Sent	Required	Date Sent
To obtain a LMHC license, applicant must meet requirements for A OR B.								
To obtain a <u>Limited Permit</u>, which is valid for two years from date of issue, applicant must <u>also</u> meet requirements for C.								
To obtain a LMHC license by endorsement of a LMHC license issued in another jurisdiction, applicant must meet requirements for D.								
Form 1 Application for Licensure and fee	✓		✓		✓		✓	
Form 2 Certification of Professional Education with Section II, Part A filled out clearly and completely to identify the graduate school and program completed.	✓		✓		Form 2 and supporting documentation for A or B must be received and approved before the Limited Permit can be issued.		✓	
Form 2 Certification of Professional Education and official transcript Have each graduate college/university you attended submit a Form 2 with official transcript and Form 2-INT for supervised internship.			✓					
Course syllabi or other supplementary documentation to determine whether studies meet the <u>substantial equivalence</u> requirements.			✓					
Form 3 Verification of Other Professional Licensure/Certification This form must be submitted directly by the licensing/certifying authority.		Only if you are/were licensed in another jurisdiction		Only if you are/were licensed in another jurisdiction				Only if you are/were licensed in another jurisdiction
Form 4. Applicant Experience Record of supervisor(s) submitting verification of at least 3,000 hours of supervised experience in mental health counseling & psychotherapy in NY or another jurisdiction****	✓		✓					
Form 4B. Certification of Experience for LMHC. Form must be submitted directly by the supervisor. ****	✓		✓					
Form 4E. Endorsement Experience Record of colleagues submitting verification of LMHC practice in another jurisdiction							✓	
Form 4F. Certification of Licensed Experience by colleagues verifying 5 or more years of LMHC practice in another							✓	
Form 5 Application for Limited Permit and fee					✓			

NBCC National Clinical Mental Health Counseling Examination***** after receipt of application, fee & NYSED approval of education.	✓		✓					
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* A program must be accredited by CACREP under 2009 clinical mental health counseling standards, including a supervised internship in mental health counseling & psychotherapy. You can access a directory of CACREP accredited programs at www.cacrep.org.

** An appropriately recognized program must be offered by a regionally accredited college or university in the US or be recognized by the appropriate civil authorities of the jurisdiction in which the program is offered. School must submit transcript and verification of supervised internship in mental health counseling & psychotherapy for review.

*** The permit may be granted for two years; it may be extended for no more than two one-year periods upon submission of a new permit application & permit fee and justification. The permit will only be issued for authorized setting(s) under qualified supervisor(s), as defined in Education Law and Commissioner's Regulations.

**** At least 50% of the supervised experience requirement must be direct client activities, as defined in the Commissioner's Regulations, in the same setting under the authorized supervisor.

***** If you passed the NCMHCE examination in another jurisdiction, you must request a score transfer from NBCC; scores submitted by applicants or jurisdictions are not acceptable. New York will not accept examinations given under non-standard conditions (e.g., ESL arrangements for extra time or translating dictionary); such applicants will have to take the exam under standard conditions. **No other examination is acceptable.**

Links to all forms may be found on our web site at <http://www.op.nysed.gov/profmhp/mhcforms.htm> for licensure.

Detailed licensure information can be found on our web site at: <http://www.op.nysed.gov/prof/mhp/mhcforms.htm> or contact the Mental Health Practitioner Unit by calling 518-474-3817 ext. 592 or by email at opunit5@nysed.gov.