# INITIAL LMFT CALIFORNIA CLINICAL EXAMINATION



### INSTRUCTIONS AND IMPORTANT INFORMATION

## **Read Carefully Before Completing Your Application**

#### WHO MAY APPLY?

This paper application may ONLY be used by the following individuals:

- An applicant who has never held an Associate registration AND has passed the Law and Ethics Exam; OR
- An applicant who submitted an Application for LMFT Licensure but did not pay the Clinical Exam fee.

#### **HOW TO APPLY**

- 1. Ensure that your current email address is on file via the <u>BreEZe system online</u>. If your email address is missing or incorrect you will NOT receive notice that you are eligible to take the exam.
- 2. Complete the attached application.
- 3. FEE: Attach a \$250 check or money order payable to "Behavioral Sciences Fund."
- 4. Submit your application and fee to the address below:

Board of Behavioral Sciences 1625 North Market Blvd., Suite S200 Sacramento CA 95834

#### TO CONFIRM RECEIPT OF APPLICATION

To confirm receipt, mail your application using a method that includes tracking. You may also contact the bank to see if your check or money order has been cashed.

#### APPLICATION PROCESSING TIME

Allow 4–6 weeks for processing. Please do not contact the Board to check on the status unless your application has been on file for 45 or more days. Pearson Vue administers the exam. After the Board processes your application, you will receive an e-mail notifying you of eligibility from Pearson Vue. You may contact Pearson Vue to schedule your exam once you receive the email. Do not attempt to schedule a date with Pearson Vue until you receive notification of eligibility. Refer to the <a href="Candidate Handbook">Candidate Handbook</a> for important information, including testing site locations (access at <a href="https://home.pearsonvue.com/cabbs">https://home.pearsonvue.com/cabbs</a>).

#### EXPEDITED PROCESSING

The Board is required to expedite the licensure process for the following applicants (access these forms at www.bbs.ca.gov>Applicant):

- Honorably discharged veterans of the U.S. Armed Forces pursuant to Business and Professions Code (BPC) section 115.4. Download the request form from the Board's website and include it ON TOP OF your application.
- Spouses/Partners of persons on active duty military pursuant to BPC section 115.5. Download the request form from the Board's <u>website</u> and include it ON TOP OF your application.
- Refugees / Asylees / Special Immigrant Status Holders ("SI" or "SQ") pursuant to BPC section 135.4. Download the request form from the Board's <u>website</u> and include it ON TOP OF your application.

#### MAILING ADDRESS OR EMAIL ADDRESS CHANGE

If your mailing address or email address has changed, be sure to update it ASAP online at <a href="https://www.breeze.ca.gov">www.breeze.ca.gov</a> to ensure you receive your notice that you are eligible to take the exam.

#### TESTING ACCOMMODATIONS

Reasonable accommodations will be provided to qualifying candidates who have a disability, a medical condition, or when English is their second language (ESL). You may also attach one of the above expedite forms to expedite your accommodation request if you meet the qualifications.

All testing sites are physically accessible to individuals with disabilities, and certain types of comfort aids are allowed (see list of approved comfort aids at the link below). All other accommodations for disabilities or medical conditions require pre-approval of a Request for Accommodation (access at https://home.pearsonvue.com/Test-takers/Accommodations.aspx).

ESL accommodations require pre-approval of a Request for ESL accommodation (access at www.bbs.ca.gov>Exams).

# IMPORTANT! AVOID YOUR FILE BEING CLOSED AND LOSING EXPERIENCE HOURS BY MEETING THE TIME FRAMES BELOW

In accordance with Title 16, California Code of Regulations section 1806, your file will be closed and deemed abandoned if any of the following occur:

- You fail to sit for the exam within one (1) year after being notified of eligibility to take the exam:
- You fail to sit for the clinical exam within one (1) year of being notified of passing the law and ethics exam; or,
- You fail to retake an exam within one (1) year from the date you were notified of failing the exam.

To reopen a closed file you must submit a new application, fee and all required documentation, as well as meet all current requirements in effect at the time the new application is submitted. There are no exceptions as this is a requirement specified in law.

This means that you could lose earned experience hours if your file is closed, as your six (6)-year period for earning hours will be recalculated to six (6) years back from the date your new application is received.

#### NOTICE ON COLLECTION OF PERSONAL INFORMATION

Please see the <u>Notice on Collection of Personal Information</u> (access at www.bbs.ca.gov>About Us>About the Board>Other Information).

#### QUESTIONS?

Please visit the **Contact Us** link at <u>www.bbs.ca.gov</u> and select an option under "Message the Board."

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## **APPLICATION FOR**

# INITIAL LMFT CALIFORNIA CLINICAL EXAMINATION



Office Use Only:			
Careful	ly read the "Instruction	s and Important Informatio	n" FIRST
See HOW TO APPLY to ensure that you qualify to submit this paper application			
Attach \$250 Fee Allow 45 Days		Days for Processing	
SSN or ITIN*:			
Legal Name**:	Last	First	Middle
** You must use y birth certificate, If you have a nai attach the "Notifi available online reflect your new	idual Taxpayer Identification  Your legal name. Your "legal marriage or domestic partion of Name Change" for at <a href="https://www.bbs.ca.gov/name">https://www.bbs.ca.gov/name</a> only if a complete "Name	urity Number, your Federal En on Number, as applicable. Al name" is the name established nership certificate, or divorce de like processed with your application orm and all required documentation pdf/forms/change_name.pdf. You lotification of Name Change" is a s unless specifically requested.	ed legally by your ecree (for example). etion, you must tion. This form is four license will
Sign	ature of Applicant		Date